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Fill in this information to identify your case:						
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS						
Case number (if known):	Chapter you are filing under: ✓ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13					

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example,	Iryna First Name	First Name	
	your driver's license or passport).	Middle Name	Middle Name	
		Litot		
	Bring your picture identification to your meeting	Last Name	Last Name	
	with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)	
2.	All other names you			
	have used in the last 8 years	First Name	First Name	
	Include your married or	Middle Name	Middle Name	
	maiden names.	Last Name	Last Name	
3.	Only the last 4 digits of			
	your Social Security	$xxx - xx - \underline{0} \underline{6} \underline{6} \underline{9}$	xxx - xx	
	number or federal Individual Taxpayer	OR	OR	
	Identification number	9xx - xx -	9xx - xx -	

(ITIN)

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Deb	otor 1 Iryna	Litot Middle Name Last Name	Case number (if known)
	First Name		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers	✓ I have not used any business names or EIN	s. I have not used any business names or EINs.
	(EIN) you have used in the last 8 years	Business name	Business name
	Include trade names and doing business as names	Business name	Business name
	doing business as names	Business name	Business name
		EIN	EIN
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		1135 Attleboro Court	
		Number Street	Number Street
			· -
		Schaumburg IL 60193 City State ZIP Code	City State ZIP Code
		Cook	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.
		Number Street	Number Street
		P.O. Box	P.O. Box
		City State ZIP Code	City State ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)
Р	art 2: Tell the Cou	rt About Your Bankruptcy Case	
7.	The chapter of the Bankruptcy Code you	Check one: (For a brief description of each, see N for Bankruptcy (Form 2010)). Also, go to the top of	otice Required by 11 U.S.C. § 342(b) for Individuals Filing f page 1 and check the appropriate box.
	are choosing to file under	✓ Chapter 7	
		Chapter 11	
		Chapter 12	
		☐ Chapter 13	

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Deb	otor 1 Iryna		Litot	Case number (if known)	
	First Name	Middle Name	Last Name		
8.	How you will pay the fee	court fo	or more details about how the cash, cashier's check, o	file my petition. Please check with th you may pay. Typically, if you are pay ir money order. If your attorney is sub th a credit card or check with a pre-prir	ring the fee yourself, you may mitting your payment on your
			• •	nents. If you choose this option, sign are in Installments (Official Form 103A).	• •
		By law than 15 fee in i	, a judge may, but is not re 50% of the official poverty nstallments). If you choos	(You may request this option only if yequired to, waive your fee, and may do line that applies to your family size an se this option, you must fill out the App 103B) and file it with your petition.	so only if your income is less d you are unable to pay the
9.	Have you filed for	☑ No			
	bankruptcy within the last 8 years?	Yes.			
		District		When	Case number
		District		When MM / DD / YYYY	Case number
		District		When	Case number
10.	Are any bankruptcy	☑ No			
	cases pending or being filed by a spouse who is	☐ Yes.			
	not filing this case with you, or by a business	Debtor		Relationsh	nip to you
	partner, or by an	District		When	Case number,
	affiliate?			MM / DD / YYYY	if known
		Debtor		Relationsh	nip to you
		District		When	Case number,
11.	Do you rent your residence?	Yes.	Go to line 12. Has your landlord obtained residence?	d an eviction judgment against you an	d do you want to stay in your
			No. Go to line 12. Yes. Fill out Initial St and file it with this bar	atement About an Eviction Judgment nkruptcy petition.	Against You (Form 101A)

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Deb	tor 1	Iryna	4:111.		Litot	Case number (if	f known)		
		•	∕liddle N _		Last Name				
Pa	art 3:	Report About Ai	ny Bı	ısine	sses You Own as a	a Sole Proprietor			
12.	12. Are you a sole proprietor of any full- or part-time business? A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.				On to Part 4. Name and location of b Name of business, if any Number Street	usiness			
	sole pro	ave more than one oprietorship, use a e sheet and attach it etition.			Health Care Busi Single Asset Rea Stockbroker (as c	box to describe your business: ness (as defined in 11 U.S.C. § I Estate (as defined in 11 U.S.C. gefined in 11 U.S.C. § 101(53A)) er (as defined in 11 U.S.C. § 101	. § 101(51B)	ZIP Coo	de
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i>		can mos	set ap st rece	opropriate deadlines. If you	the court must know whether yo you indicate that you are a small nent of operations, cash-flow star of exist, follow the procedure in 1	l business d tement, and	lebtor, you I federal ind	must attach your come tax return
	debtor?	abla	No.	I am not filing under C	hapter 11.				
		For a definition of small business debtor, see		No.	I am filing under Chap the Bankruptcy Code.	ter 11, but I am NOT a small bus	siness debto	or according	g to the definition in
	11 U.S.	C. § 101(51D).		Yes.	I am filing under Chap Bankruptcy Code.	ter 11 and I am a small business	s debtor acc	ording to th	ne definition in the
Pa	art 4:	Report If You Ov	wn oi	r Hav	e Any Hazardous I	Property or Any Property	That Nee	eds Imm	ediate Attention
14.	propert alleged immine	own or have any y that poses or is to pose a threat of nt and identifiable to public health or		No Yes.	What is the hazard?				
	safety? any pro	Or do you own operty that needs attention?			If immediate attention	is needed, why is it needed?			
	perisha livestoc	mple, do you own ble goods, or k that must be fed, or ng that needs urgent			Where is the property?	Number Street			
						City		State	ZIP Code

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Debtor 1 First Name Litot Case number (if known) Last Name

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again. You must check one:

✓ I received a briefing from an approved credit

About Debtor 1:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone or

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case): *You must check one:*

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1	Iryna		Litot		Case number (if	know	n)		
		First Name	Middle N	lame Last Name						
Pá	art 6:	Answer These	Quest	ions for Reporting Pu	rpos	ses				
16.	What k have?	ind of debts do you	16a		as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b.					
			16b			iness debts? Business debatment or through the operation		e debts that you incurred to obtain e business or investment.		
			16c	. State the type of debts yo	u ow	e that are not consumer or bu	sines	s debts.		
17.	Are yo Chapte	u filing under er 7?		No. I am not filing under	Chap	oter 7. Go to line 18.				
	any ex exclud admini are pai availab	estimate that after empt property is ed and strative expenses d that funds will be ble for distribution ecured creditors?	Ø	•		•	-	xempt property is excluded and to distribute to unsecured creditors?		
18.		any creditors do timate that you		1-49 50-99 100-199 200-999		1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000		
19.		uch do you te your assets to th?		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
20.		uch do you te your liabilities to		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		

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Debtor 1	Iryna	Middle Norse	Litot	Case number (if known)				
	First Name	Middle Name	Last Name					
Part 7:	Sign Below							
For you		I have examir and correct.	ned this petition, and I dec	lare under penalty of perjury that the information provided is true				
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I cho proceed under Chapter 7.						
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
		I request relie	ef in accordance with the o	hapter of title 11, United States Code, specified in this petition.				
		connection wi	•	concealing property, or obtaining money or property by fraud in result in fines up to \$250,000, or imprisonment for up to 20 years, and 3571.				
		X /s/ Iryna		X				
		Iryna Litot	, Debtor 1	Signature of Debtor 2				
		Executed	on 11/03/2016	Executed on				
			MM / DD / YYYY	MM / DD / YYYY				

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Debtor 1	Iryna	Litot	Case number (if known)
	First Name	Middle Name Last Name	
For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page.		eligibility to proceed under Chapte relief available under each chapte the debtor(s) the notice required by	ned in this petition, declare that I have informed the debtor(s) about r 7, 11, 12, or 13 of title 11, United States Code, and have explained the r for which the person is eligible. I also certify that I have delivered to y 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, ter an inquiry that the information in the schedules filed with the petition
		X /s/ Igor Gromov Signature of Attorney for Debto	Date 11/03/2016 MM / DD / YYYY
		Igor Gromov	
		Printed name Gromov Law Offices	
		Firm Name	
		1020 N. Milwaukee Ave., S Number Street	te. 101
		Deerfield City	IL 60015 State ZIP Code
		Contact phone (847) 845-17	79 Email address gromlaw@gmail.com
		6282530	
		Bar number	State

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E	ill in this inf	ormation to	identify your case	and this filing:				
	ebtor 1	Iryna	racinity your oasc	Litot				
		First Name	Middle Name	Last Name	-			
	ebtor 2 Spouse, if filing)	First Name	Middle Name	Last Name	-			
U	nited States Bai	nkruptcy Court f	or the: NORTHERN D	ISTRICT OF ILLINOIS				
	ase number				- □ Check	if this is an		
(if	known)				_	ded filing		
∩f	ficial Form	106 A /D						
	ficial Form chedule A/	<u>поодов</u> ′В: Proper	tv			12/15		
the filir she	asset in the cang together, bo	ategory where y th are equally r . On the top of	ou think it fits best. B esponsible for supplyi any additional pages,	e as complete and accurate ng correct information. If m write your name and case no	asset fits in more than one ca as possible. If two married po ore space is needed, attach a umber (if known). Answer eve	eople are separate ery question.		
Р	art 1: Des	scribe Each	Residence, Buildir	ng, Land, or Other Real	Estate You Own or Have	e an Interest In		
1.	✓ No. Go t			in any residence, building, l	and, or similar property?			
2.		-	•	of your entries from Part 1, ite that number here	_	\$0.00		
Р	art 2: Des	scribe Your	Vehicles					
	-		•		are registered or not? Include Executory Contracts and Unexpl	•		
3.	Cars, vans, tr	ucks, tractors,	sport utility vehicles, r	notorcycles				
	✓ No ☐ Yes							
4.								
5.	Add the dolla	-	•	of your entries from Part 2, i	_	\$0.00		
Р	art 3: Des	scribe Your	Personal and Hous	sehold Items				
Do	you own or ha	ve any legal or	equitable interest in ar	ny of the following items?	_	Current value of the portion you own? Do not deduct secured claims or exemptions.		
6.	Examples: Ma	oods and furnis ajor appliances,	shings furniture, linens, china,	kitchenware				
	□ No ☑ Yes. Des	cribe ordin	ary furniture and ele	ctronics		\$1,000.00		

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Deb	_	yna	Litot	Case number (if known)	
		rst Name	Middle Name Last Name		
7.	Electronic Examples	: Televisions	s and radios; audio, video, stereo, and digital equections; electronic devices including cell phones,		
	✓ No ☐ Yes.	Describe			
8.			nd figurines; paintings, prints, or other artwork; b n, or baseball card collections; other collections,		
	✓ No ☐ Yes.	Describe			
9.		Sports, pho	and hobbies tographic, exercise, and other hobby equipment d kayaks; carpentry tools; musical instruments	; bicycles, pool tables, golf clubs, skis;	
	✓ No ☐ Yes.	Describe			
10.	•	: Pistols, rifle	es, shotguns, ammunition, and related equipmer	ıt	
	✓ No ☐ Yes.	Describe			
11.	•	: Everyday cl	lothes, furs, leather coats, designer wear, shoes	, accessories	
	☐ No ✓ Yes.	Describe	necessary clothing		\$1,000.00
12.	Jewelry Examples	: Everyday je gold, silver	ewelry, costume jewelry, engagement rings, wed	ding rings, heirloom jewelry, watches, gems,	
	✓ No ☐ Yes.	Describe			
13.	Non-farm Examples		birds, horses		
	✓ No ☐ Yes.	Describe			
14.	Any other did not lis		nd household items you did not already list, i	ncluding any health aids you	
	_	Give specific			
15.			of all of your entries from Part 3, including an		\$2,000.00
Pa	art 4:	Describe \	Your Financial Assets		
Do	you own oi	^r have any le	egal or equitable interest in any of the following	ng?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Examples	: Money you petition	have in your wallet, in your home, in a safe dep	osit box, and on hand when you file your	
	✓ No ☐ Yes			Cash:	

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Deb	tor 1	Iryna		Litot	Case number (if known)	
		First Name	Middle	Name Last Name		
17.	-		ses, and	her financial accounts; certificates of other similar institutions. If you have r	•	
	ш.	lo 'es		Institution name:		
		17.1. Checking acc	count:	PNC checking		\$900.00
18.		•		raded stocks accounts with brokerage firms, mone	y market accounts	
		'es	Institution	on or issuer name:		
19.	_	publicly traded stocl terest in an LLC, par		erests in incorporated and unincorp , and joint venture	porated businesses, including	
	ir	es. Give specific	Nome	f onliku	0/ of our orabin	
20.	Gove	•		and other negotiable and non-nego		
	Non-i	negotiable instrument	•	onal checks, cashiers' checks, promise you cannot transfer to someone by	•	
	ir	lo 'es. Give specific nformation about nem	Issuer r	name:		
21.		ement or pension ac apples: Interests in IRA profit-sharing p	, ERISA,	Keogh, 401(k), 403(b), thrift savings	accounts, or other pension or	
	_	es. List each	Type of a	ccount: Institution name:		
22.	Your :		eposits yo	ts ou have made so that you may continu ds, prepaid rent, public utilities (electr	• •	
	☑ N	lo 'es		Institution name or individu	ual:	
23.	Annu		a specific	periodic payment of money to you, e	ither for life or for a number of years)	
	_		Issuer r	name and description:		
24.		ests in an education S.C. §§ 530(b)(1), 529			ram, or under a qualified state tuition program.	
			Institution	on name and description. Separately	file the records of any interests. 11 U.S.C. § 521(c)
25.		ts, equitable or future ers exercisable for ye		ts in property (other than anything l fit	listed in line 1), and rights or	
	_	lo 'es. Give specific nformation about them	ı			
26.				rade secrets, and other intellectual websites, proceeds from royalties and		
	_	lo 'es. Give specific nformation about them	า			

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Deb	tor 1	Iryna		Litot	Case number (if known)	
		First Name	Middle Name	Last Name		
27.			d other general intang its, exclusive licenses, o		dings, liquor licenses, professional lice	nses
	☑ No					
		 Give specific ormation about the 	m			
Mor		roperty owed to y				Current value of the portion you own?
						Do not deduct secured claims or exemptions.
28.	Tax ref	unds owed to you	I			
	✓ No ☐ Yes	s. Give specific inf	formation		Federa	al: \$0.00
	_	out them, including			_	\$0.00
	•	already filed the r			State:	
	and	the tax years			Local:	\$0.00
29.	-	support les: Past due or lu	mp sum alimony, spous	al support, child support, m	aintenance, divorce settlement, proper	ty settlement
	✓ No ☐ Yes	s. Give specific inf	formation		Alimony:	\$0.00
	_				Maintenance:	\$0.00
					Support:	\$0.00
					Divorce settlemen	t: \$0.00
					Property settlement	nt: \$0.00
30.	Examp	, -	, disability insurance pa	yments, disability benefits, s; unpaid loans you made t	sick pay, vacation pay, workers' to someone else	
	✓ No ☐ Yes	s. Give specific inf	ormation			
31.		ts in insurance po les: Health, disabil		alth savings account (HSA)	; credit, homeowner's, or renter's insur	ance
	✓ No					
		 Name the insurant npany of each poli- 				
		d list its value	•	:	Beneficiary: S	urrender or refund value:
32.	If you a	re the beneficiary	that is due you from so of a living trust, expect p y because someone has	proceeds from a life insuran	nce policy, or are currently	
	✓ No ☐ Yes	s. Give specific inf	formation			
33.			•	u have filed a lawsuit or n	nade a demand for payment ue	
	✓ No ☐ Yes	s. Describe each o	elaim			
34.		contingent and un	liquidated claims of ev	ery nature, including cou	nterclaims of the debtor and	
	✓ No	s. Describe each o	slaim			

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Deb	tor 1	Iryna First Name	Middle Name	Litot Last Name	Case number (if known)	
35.	Any fin	ancial assets yo	u did not already lis			
	✓ No	s. Give specific in	nformation			
36.					ny entries for pages you have	\$900.00
Pa	art 5:	Describe Any	Business-Relat	ed Property You C	Own or Have an Interest In. List any	real estate in Part 1.
37.	Do you	own or have an	y legal or equitable i	interest in any busines	ss-related property?	
		Go to Part 6. Go to line 38.				
20	A	, , , , , , , , , , , , , , , , , , ,		decede comed		Current value of the portion you own? Do not deduct secured claims or exemptions.
38.		its receivable or	commissions you a	iiready earned		
	✓ No	s. Describe				
39.		es: Business-rela	shings, and supplies ated computers, software, electronic devices		copiers, fax machines, rugs, telephones,	
	✓ No ☐ Yes	s. Describe				
40.	Machin	ery, fixtures, eq	uipment, supplies ye	ou use in business, an	d tools of your trade	
	✓ No ☐ Yes	s. Describe				
41.	Invento	ry				
	✓ No	s. Describe				
42.	Interes	ts in partnership	s or joint ventures			
	✓ No ☐ Yes	s. Describe N	lame of entity:		% of ownership:	
43.	Custon	ner lists, mailing	lists, or other comp	ilations		
	✓ No ☐ Yes	S. Do your lists i		dentifiable information	(as defined in 11 U.S.C. § 101(41A))?	
44.	Any bu	siness-related p	roperty you did not	already list		
	✓ No	s. Give specific ir	nformation.			
45.			all of your entries fr	•	ny entries for pages you have	\$0.00

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Debt	or 1	Iryna	No. 19 No.	Litot	Case number (if known)	
		First Name	Middle Name	Last Name		
Pa	rt 6:			nercial Fishing-Re armland, list it in Pa	lated Property You Own or Have a	n Interest In.
		II you own or	ilave all liliciest ili	allinanu, nocieni i a	11.1.	
46.	Do you	u own or have ar	ny legal or equitable ir	nterest in any farm- or o	commercial fishing-related property?	
	_	o. Go to Part 7.				
	☐ Ye	es. Go to line 47.				
						Current value of the portion you own? Do not deduct secured claims or exemptions.
		animals oles: Livestock. pe	oultry, farm-raised fish			
	✓ No	•	ou,, .aa.ooao			
	☐ Ye	es				
48.	Crops	either growing	or harvested			
	_	os. Give specific formation				
49.	Farm a	and fishing equip	oment, implements, m	achinery, fixtures, and	tools of trade	
	✓ No) es				
50.	Farm a	and fishing supp	lies, chemicals, and fe	eed		
	✓ No) 9S				
51.	Any fa	ırm- and comme	cial fishing-related pr	operty you did not alre	ady list	
	_	os. Give specific formation				
52.					y entries for pages you have →	\$0.00
Pa	rt 7:	Describe All	Property You Ow	n or Have an Intere	est in That You Did Not List Above	
	•		perty of any kind you ets, country club memb	•		
	✓ No	o es. Give specific i	nformation.			
54.	Add th	ne dollar value of	all of your entries fro	m Part 7. Write that nu	ımber here →	\$0.00

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Debtor 1	Iryna	Litot	Case nu	mber (if known)		
	First Name Middle Name	Last Name				
Part 8:	List the Totals of Each Part of t	his Form				
55. Part	1: Total real estate, line 2				>	\$0.00
56. Part 2	2: Total vehicles, line 5		\$0.00			
57. Part	3: Total personal and household items, I	ine 15	\$2,000.00			
58. Part	4: Total financial assets, line 36		\$900.00			
59. Part	5: Total business-related property, line 4	5	\$0.00			
60. Part	6: Total farm- and fishing-related proper	ty, line 52	\$0.00			
61. Part	7: Total other property not listed, line 54	+	\$0.00			
62. Total	personal property. Add lines 56 throug	h 61	\$2,900.00	Copy personal property total	+	\$2,900.00
63. Total	of all property on Schedule A/B. Add	line 55 + line 62				\$2,900.00

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Fill in this inf	ormation to ide	ntify your ca	ase:					
Debtor 1	Iryna		Litot					
Debtor 2	First Name	Middle Name	Last Name					
(Spouse, if filing)	First Name	Middle Name	Last Name					
United States Bar	nkruptcy Court for the	e: NORTHER	N DISTRICT OF I	LLIN	OIS		☐ Check if this is an	
Case number (if known)							amended filing	
Official Form	106C							
Schedule C:	The Propert	y You Cla	im as Exemp	t				04/16
Using the property space is needed, fi write your name an	you listed on Sched Il out and attach to the d case number (if kn	ule A/B: Propei nis page as ma nown).	rty (Official Form 100 ny copies of Part 2	SA/B) ?: Add	as your source, ditional Page as	list the pro necessary	nsible for supplying correct operty that you claim as exe y. On the top of any additio	mpt. If more nal pages,
is to state a specific exempted up to the receive certain be exemption of 100%	fic dollar amount as e amount of any ap nefits, and tax-exer ⁄⁄6 of fair market valu	s exempt. Alte oplicable statu npt retirement ue under a law	ernatively, you may tory limit. Some ex fundsmay be unl	clair emp imite mpti	n the full fair ma tionssuch as tl d in dollar amou on to a particula	arket value hose for h unt. Howe ir dollar ai	claim. One way of doing see of the property being see the property being see the did not be the control of the count and the value of the attory amount.	
Part 1: Ide	ntify the Proper	ty You Clai	m as Exempt					
You are o	You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)							
•	of the property and lists this property	t	Current value of the portion you own		ount of the mption you clair	-	pecific laws that allow exe	mption
			Copy the value from Schedule A/B		ck only one box h exemption	for		
Brief description:			\$1,000.00	$\overline{\mathbf{Q}}$	\$1,000.00	73	35 ILCS 5/12-1001(b)	
•	re and electronics	5	¥1,000.00		100% of fair ma	ırket		
Line from Schedule	e A/B: 6				value, up to any applicable statu limit			
Brief description:		_	\$1,000.00	$\overline{\mathbf{V}}$	\$1,000.00	73	35 ILCS 5/12-1001(a), (e))
necessary cloth Line from Schedule	_				100% of fair ma value, up to any applicable statu limit	/		
(Subject to ad	_	and every 3 ye	nore than \$160,375? ears after that for cas	es fil				

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Debtor 1	Iryna		Litot	Case number (if known)		
	First Name	Middle Name	Last Name			
Part 2:	Additional Pa	age				
Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption	
			Copy the value from Schedule A/B	Check only one each exemption		
Brief descrip			\$900.00	<u> </u>	00.00 fair market	735 ILCS 5/12-1001(b)
Line from So	chedule A/B: 17. 1	<u>l </u>		value, up applicable limit	to any e statutory	

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F	ill in this info	ormation to id	lentify your case:				
D	ebtor 1	Iryna		Litot			
		First Name	Middle Name	Last Name			
D	ebtor 2						
(S	Spouse, if filing)	First Name	Middle Name	Last Name			
Uı	nited States Bar	nkruptcy Court for	the: NORTHERN D	ISTRICT OF ILLINOIS	<u>s</u>		
C	ase number					☐ Check if this is	n on
(if	known)					amended filing	
Of	ficial Form	106D					
Sc	hedule D:	Creditors \	Who Have Clai	ims Secured by	Property		12/15
cor	rect informatio	n. If more space	is needed, copy the	ed people are filing tog Additional Page, fill it d case number (if know	out, number the entri	• •	
1.	Do any credit	ors have claims	secured by your prop	perty?			
	Ľ.	ck this box and su in all of the inform		ourt with your other sche	edules. You have noth	ning else to report on th	is form.
Р	art 1: Lis	t All Secured	Claims				
	12-4-11		Planka and P				
2.			editor has more than o r for each claim. If mo		Column A	Column B	Column C
	·		st the other creditors in		Amount of claim	Value of collateral	Unsecured
	•	•	s in alphabetical order	according to the	Do not deduct the	that supports this	portion
	creditor's name	e.			value of collateral	claim	If any

Add the dollar value of your entries in Column A on this page. Write that number here:

\$0.00

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Fill in this inf	ormation to ider							
Debtor 1	Iryna		Litot					
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse, if filing)	First Name	Middle Name	Last Name					
United States Ba	United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS							
Case number					Check if this is an			
(if known)					amended filing			

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

- Do any creditors have priority unsecured claims against you?
 - No. Go to Part 2.

Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.

Total claim Priority Nonpriority amount amount

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Debtor 1	Iryna First Name	Middle Name	Litot Last Name		Case number (if known)	
		aus rame	2450 1 141116			
Part 2:	List All of Y	our NONPRIORIT	TY Unsecured Cl	aims		
3. Do an	v creditors have i	nonpriority unsecured	d claims against you	ı?		
,	-	ing to report in this par	•		our other schedules.	
☑ Y	'es					
If a cre type of	editor has more that f claim it is. Do no	an one nonpriority unse	ecured claim, list the cluded in Part 1. If m	creditor separate ore than one cred	editor who holds each claim. ly for each claim. For each claim lis ditor holds a particular claim, list the ation Page of Part 2.	
						Total claim
4.1						\$11,973.00
Bank of A			_ Last 4 digits of a	ccount number	<u>x x x</u>	
	reditor's Name kruptcy Depart ı	ment	When was the de	bt incurred?	10/2014 and thereafter	
Number	Street		As of the date yo	u file, the claim	is: Check all that apply.	
	S Point Pkwy		_ ☐ Contingent ☐ Unliquidated			
PO Box 9	000		Disputed			
Getzville		IY 14068-9000	_ _			
City Who incur		tate ZIP Code Check one.	Type of NONPRI		ed claim:	
⊘ Debtor			Student loans		paration agreement or diverse	
Debtor	2 only			ot report as prior	paration agreement or divorce	
_	1 and Debtor 2 on	•	•		ring plans, and other similar debts	
At least	t one of the debtor	s and another	Other. Specif	•	3 11 11 11 11 11 11 11	
☐ Check	if this claim is for	a community debt	Credit Card			
	n subject to offse	t?				
☑ No						
Yes						
4.2						\$230.00
Bank of A	morica		Last 4 digits of a	ccount number	x x x 8	Ψ230.00
	reditor's Name		When was the de		01/2015 and thereafter	
	kruptcy Departi	ment				
Number 475 Cross	Street S Point Pkwy		_	u me, me ciami	is: Check all that apply.	
PO Box 9			Unliquidated			
Getzville	N	IY 14068-9000	Disputed			
City		tate ZIP Code	Type of NONPRI	ORITY unsecure	ed claim:	
		check one.	Student loans			
✓ Debtor Debtor	-				paration agreement or divorce	
	1 and Debtor 2 on	ly	•	ot report as prior	•	
	t one of the debtor	•	- - - - - - - - - -	•	ring plans, and other similar debts	
	if this claim is for	a community debt	Other. Specif	•		
	n subject to offse	-	J. Juli Juli			
✓ No	,					
Yes						

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Debtor 1	Iryna		Litot	Case number (if known)	
	First Name	Middle Name	Last Name		
Part 2:	Your NO	NPRIORITY Unsecu	red Claims Continu	ation Page	
After listin		on this page, number the	m sequentially from the		Total claim
4.3					\$673.00
	Bank Delawa	are	_ Last 4 digits of account	number <u>5</u> <u>7</u> <u>7</u> <u>7</u>	
	Creditor's Name		When was the debt inco	urred? 10/2015 and thereafter	
Number	Street		As of the date you file,	the claim is: Check all that apply.	
			☐ Contingent☐ Unliquidated		
Wilmingt	on	DE 19801-0000	Disputed		
City	<u> </u>	State ZIP Code	Type of NONPRIORITY	unsecured claim:	
	red the debt?	Check one.	Student loans		
뜨	r 1 only r 2 only			ut of a separation agreement or divorce	
_	r 1 and Debtor 2	2 only	that you did not repo	. ,	
		otors and another		profit-sharing plans, and other similar debts	
Check	if this claim is	for a community debt			
	m subject to of	fset?	0.00.00		
☑ No	-				
☐ Yes					
4.4					* 225.00
	Dank Dalaw		Look A digito of account		\$635.00
	Bank Delawa Creditor's Name	are	_ Last 4 digits of account		
125 S We	est St		When was the debt incu		
Number Att: Cred	Street it Bureau			the claim is: Check all that apply.	
71111 0104			Contingent ☐ Unliquidated		
			Disputed		
Wilmingt City	on	DE 19801-5014 State ZIP Code			
-	red the debt?	Check one.	Type of NONPRIORITY	unsecured claim:	
☑ Debtor	r 1 only		☐ Student loans ☐ Obligations arising o	ut of a separation agreement or divorce	
ш	r 2 only) l	that you did not repo	, •	
_	r 1 and Debtor 2 st one of the del	otors and another		profit-sharing plans, and other similar debts	
_		for a community debt	Other. Specify		
	m subject to of		Credit Card		
✓ No	iii subject to oi	1501:			
Yes					
4.5	_				\$2,198.00
Bloom/D	SNB Creditor's Name		_ Last 4 digits of account		
, ,	ke Boulevard		When was the debt incu	urred? 10/2015 and thereafter	
Number	Street			the claim is: Check all that apply.	
			_ ☐ Contingent ☐ Unliquidated		
			Disputed		
Mason		OH 45040-0000 State ZIP Code	_ _ _ ·		
City Who incur	red the debt?	State ZIP Code Check one.	Type of NONPRIORITY	unsecured claim:	
	r 1 only		Student loans Obligations arising of	ut of a separation agreement or divorce	
Debtor	r 2 only		that you did not repo	, •	
-	r 1 and Debtor 2	•		profit-sharing plans, and other similar debts	
ш		otors and another	Other. Specify		
_		for a community debt	Credit Card		
	m subject to of	iset?			
✓ No ☐ Yes					

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Debtor 1	Iryna First Name	Middle Name	Litot Last Name	Case number (if known)	
Part 2:	Your NO	NPRIORITY Unsecu	red Claims Cont	inuation Page	
After listir		on this page, number the	m sequentially from th	е	Total claim
4.6					\$2,805.00
Capital C			Last 4 digits of acc	ount number <u>0 5 8 8</u>	
Nonpriority (Creditor's Name		When was the debt	incurred? 08/2014 and thereafter	
Number	Street		As of the date you	file, the claim is: Check all that apply.	
			_ Contingent		
			Unliquidated Disputed		
Salt Lake	City	UT 84130-0285	_ Disputed		
City	rad the debt?	State ZIP Code	Type of NONPRIOR	ITY unsecured claim:	
	red the debt? r 1 only	Check one.	Student loans		
<u> </u>	r 2 only			ng out of a separation agreement or divorce report as priority claims	
☐ Debtor	r 1 and Debtor 2			n or profit-sharing plans, and other similar deb	ots
☐ At leas	st one of the del	otors and another	Other. Specify	,	
_		for a community debt	Credit Card		
	m subject to of	fset?			
✓ No ☐ Yes					
4.7					\$1,094.00
Capital C			_ Last 4 digits of acc	ount number <u>0 5 8 6</u>	
Nonpriority (Creditor's Name		When was the debt	incurred? 10/2015 and thereafter	
Number	Street		As of the date you	file, the claim is: Check all that apply.	
Internal Z	Zip 12030-163		_ Contingent		
			☐ Unliquidated ☐ Disputed		
Richmon	d	VA 23285-5520			
City Who incur	red the debt?	State ZIP Code Check one.	Type of NONPRIOR	ITY unsecured claim:	
	r 1 only	Officer offic.	Student loans		
	r 2 only			ng out of a separation agreement or divorce report as priority claims	
=	r 1 and Debtor 2	•	•	n or profit-sharing plans, and other similar del	ots
_		otors and another			
_		for a community debt	Credit Card		
	m subject to of	rset?			
✓ No ☐ Yes					
4.8					\$736.00
Capital C			_ Last 4 digits of acc	ount number <u>2</u> <u>2</u> <u>3</u> <u>2</u>	
PO Box 3	Creditor's Name		When was the debt	incurred? 10/2014 and thereafter	
Number	Street		As of the date you	file, the claim is: Check all that apply.	
			_ Contingent		
			Unliquidated ☐ Disputed		
Salt Lake	City	UT 84130-0285	_ _	-	
City Who incur	red the debt?	State ZIP Code Check one.		ITY unsecured claim:	
	r 1 only	2	Student loans	ng out of a separation sgreement or diverse	
Debto	r 2 only			ng out of a separation agreement or divorce report as priority claims	
=	r 1 and Debtor 2	•	•	n or profit-sharing plans, and other similar deb	ots
<u> </u>		otors and another	Other. Specify		
ш		for a community debt	Credit Card		
Is the clair	m subject to of	rset?			
✓ Yes					

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Debtor 1	Iryna First Name	Middle Name	Litot Last Name	Case number (if known)	
Part 2:	Your NO	NPRIORITY Unsecu	red Claims Cont	tinuation Page	
After listin		on this page, number the	m sequentially from th	ne	Total claim
4.9					\$1,430.00
Capital C			_ Last 4 digits of acc	ount number <u>8 8 6 9</u>	
PO Box 3	Creditor's Name		When was the debt	incurred? 10/2013 and thereafter	
Number	Street		As of the date you	file, the claim is: Check all that apply.	
			_ Contingent		
			Unliquidated Disputed		
Salt Lake	City	UT 84130-0285			
City Who incur	red the debt?	State ZIP Code Check one.		RITY unsecured claim:	
	r 1 only	Chook one.	Student loans	ing out of a separation agreement or divorce	
☐ Debtor	r 2 only			report as priority claims	
=	r 1 and Debtor 2		☐ Debts to pension	n or profit-sharing plans, and other similar debts	
		otors and another	Other. Specify		
_		for a community debt	Credit Card		
No No	m subject to of	iset?			
Yes					
4.10					\$1,188.00
Capital C	One Creditor's Name		_ Last 4 digits of acc		
PO Box 3			When was the debt		
Number	Street		_	file, the claim is: Check all that apply.	
			_ ☐ Contingent ☐ Unliquidated		
C-14 -1	City	LIT 04420 020E	Disputed		
Salt Lake	City	UT 84130-0285 State ZIP Code	Type of NONDRIGE	RITY unsecured claim:	
	red the debt?	Check one.	Student loans	irr unsecured claim.	
<u> </u>	r 1 only			ing out of a separation agreement or divorce	
	r 2 only r 1 and Debtor 2	only	•	report as priority claims	
		otors and another	= ~	n or profit-sharing plans, and other similar debts	
Check	t if this claim is	for a community debt	Credit Card		
Is the clai	m subject to of	fset?			
☑ No					
Yes					
4.11					\$1,364.00
Capital C	ne		Last 4 digits of acc	ount number 8 4 3 8	
Nonpriority O	Creditor's Name		When was the debt	incurred? 10/2014 and thereafter	
Number	Street		As of the date you	file, the claim is: Check all that apply.	
Internal 2	Zip 12030-163		_ Contingent		
			Unliquidated Disputed		
Richmon	d	VA 23285-5520	— Pisharea		
City Who incur	red the debt?	State ZIP Code Check one.	Type of NONPRIOR	RITY unsecured claim:	
	r 1 only	OHOUR OHE.	Student loans	ing out of a congration agreement as diverse	
Debto	r 2 only		·	ing out of a separation agreement or divorce report as priority claims	
=	r 1 and Debtor 2	•	•	n or profit-sharing plans, and other similar debts	
ш		otors and another	Other. Specify		
ш		for a community debt	Credit Card		
Is the cial	m subject to of	1361 !			
✓ Yes					

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Debtor 1	Iryna		Litot	Case number (if known)	
	First Name	Middle Name	Last Name		
Part 2:	Your NO	NPRIORITY Unsecui	red Claims Contin	uation Page	
After listin		on this page, number the	m sequentially from the		Total claim
4.12	-ugo.				* 0.00
Chase			Last 4 digits of accou	int number	\$0.00
Nonpriority C	Creditor's Name		When was the debt in		
800 Broo Number	ksedge Boule Street	evard		e, the claim is: Check all that apply.	
			_ ☐ Contingent	·, ····	
			Unliquidated		
Westervi	lle	OH 43081-0000	[—] ☐ Disputed		
City	rad the debt?	State ZIP Code	Type of NONPRIORIT	Y unsecured claim:	
	red the debt?	Check one.	Student loans		
<u> </u>	r 2 only			out of a separation agreement or divorce port as priority claims	
ш	r 1 and Debtor 2	•		or profit-sharing plans, and other similar debts	
ш		otors and another	Other. Specify		
ш		for a community debt	Credit Card		
✓ No	m subject to of	iset?			
Yes					
4.13					
ب			Look A dinito of accoun		\$3,750.00
Chase Nonpriority C	Creditor's Name		_ Last 4 digits of accou		
800 Broo	ksedge Boule	evard	When was the debt in		
Number	Street		As of the date you file Contingent	e, the claim is: Check all that apply.	
			Unliquidated		
Westervi	llo	OH 42094 0000	Disputed		
City	ile	OH 43081-0000 State ZIP Code	_ Type of NONPRIORIT	Y unsecured claim:	
	red the debt?	Check one.	Student loans	T discourse significant	
= 5-4-	r 1 only r 2 only			out of a separation agreement or divorce	
ш	r 1 and Debtor 2	only		port as priority claims	
	st one of the deb	otors and another	Other. Specify	or profit-sharing plans, and other similar debts	
☐ Check	if this claim is	for a community debt	Credit Card		
	m subject to of	fset?			
✓ No ☐ Yes					
Yes					
4.14					\$5,395.00
Chase			_ Last 4 digits of accou	int number <u>5</u> <u>7</u> <u>6</u> <u>0</u>	
Nonpriority C	reditor's Name ksedge Boule	evard	When was the debt in	curred? 02/2015 and thereafter	
Number	Street		As of the date you file	e, the claim is: Check all that apply.	
			_ Contingent		
			☐ Unliquidated ☐ Disputed		
Westervi	lle	OH 43081-0000	_ _ .		
City Who incur	red the debt?	State ZIP Code Check one.	Type of NONPRIORIT	Y unsecured claim:	
	r 1 only		☐ Student loans ☐ Obligations arising	out of a separation agreement or divorce	
Debtor	r 2 only	anh.	`	port as priority claims	
-	r 1 and Debtor 2 st one of the deb	only otors and another	Debts to pension of	or profit-sharing plans, and other similar debts	
ш		for a community debt			
_	m subject to of	-	Credit Card		
✓ No	ວູລອງວວະ ເວ ປາ				
Yes					

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Debtor 1	Iryna		Litot	Case number (if known)	
	First Name	Middle Name	Last Name		
Part 2:	Your NO	NPRIORITY Unsecu	red Claims Contir	nuation Page	
After listin	-	on this page, number the	em sequentially from the		Total claim
4.15					\$4,326.00
Chase			Last 4 digits of accou	ınt number <u>1 8 2 0</u>	
	Creditor's Name Ksedge Boul	avard	When was the debt in	ncurred? 08/2014 and thereafter	
Number	Street	zvai u	As of the date you file	e, the claim is: Check all that apply.	
			Contingent Unliquidated		
Westervi	ماا	OH 43081-0000	Disputed		
City	iic .	State ZIP Code	Type of NONPRIORIT	Y unsecured claim:	
Who incur	red the debt?	Check one.	Student loans	. anosara sami	
<u> </u>	1 only		—	out of a separation agreement or divorce	
<u> </u>	· 2 only · 1 and Debtor 2	2 only	that you did not re	port as priority claims	
		otors and another		or profit-sharing plans, and other similar debts	
ш		for a community debt	Other. Specify		
ш			Credit Card		
✓ No	m subject to of	iserr			
Yes					
4.16					\$4,354.00
Chase			Last 4 digits of accoι	ınt number <u>8 4 1 3</u>	
	reditor's Name ksedge Boul	ovard	When was the debt in	ncurred? 07/2014 and thereafter	
Number	Street	evaru	As of the date you file	e, the claim is: Check all that apply.	
			Contingent		
			Unliquidated		
Westervi	lle	OH 43081-0000	─ ☐ Disputed		
City		State ZIP Code	Type of NONPRIORIT	Y unsecured claim:	
Who incur	red the debt?	Check one.	Student loans		
	1 only			g out of a separation agreement or divorce	
ш	· 2 only · 1 and Debtor 2	2 only	that you did not re	port as priority claims	
_		otors and another		or profit-sharing plans, and other similar debts	
_		for a community debt	Other. Specify		
	m subject to of		Credit Card		
✓ No	in subject to of	1301:			
Yes					
4.17					\$2,126.00
Citibank			Last 4 digits of accou	unt number 1 6 0 3	
Nonpriority C	reditor's Name		When was the debt in		
PO Box 6	Street			e, the claim is: Check all that apply.	
Nullibei	Sileet		_	e, the claim is. Oncor all that apply.	
			Unliquidated		
Sioux Ea	lle	SD 57117-6241	Disputed		
Sioux Fa	lio .	SD 57117-6241 State ZIP Code	Type of NONPRIORIT	Y unsecured claim:	
Who incur	red the debt?	Check one.	Student loans	. anobara dami	
<u> </u>	1 only			out of a separation agreement or divorce	
\square	· 2 only	l only		port as priority claims	
=	1 and Debtor 2	only another		or profit-sharing plans, and other similar debts	
ш			Other. Specify		
_		for a community debt	Credit Card		
	m subject to of	rset?			
✓ No ☐ Yes					

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Debtor 1	Iryna		Litot	Case number (if known)	
	First Name	Middle Name	Last Name	· · · · · ·	
Part 2:	Your NO	NPRIORITY Unsecu	red Claims Conti	nuation Page	
After listin	ng any entries o	n this page, number the	em sequentially from the		Total alaim
previous	page.				Total claim
4.18					\$12,911.00
Citibank	2 12 1 11		Last 4 digits of accor	unt number <u>0</u> <u>0</u> <u>3</u> <u>3</u>	
PO Box	Creditor's Name		When was the debt in	ncurred? <u>02/2012 and thereafter</u>	
Number	Street			e, the claim is: Check all that apply.	
Sioux Fa	lle	SD 57117-6241	Disputed		
City	IIIS	State ZIP Code	Type of NONPRIORI	ΓY unsecured claim:	
B. I. (rred the debt?	Check one.	Student loans		
<u> </u>	r 1 only r 2 only			g out of a separation agreement or divorce	
	r 1 and Debtor 2	only	•	port as priority claims or profit-sharing plans, and other similar debts	
☐ At leas	st one of the deb	tors and another	Other. Specify	or prom onaming plane, and onless online doctor	
ш.		for a community debt	Credit Card		
	m subject to off	set?			
✓ No ☐ Yes					
4.19					\$2,627.00
Citibank Nonpriority (Creditor's Name		Last 4 digits of acco	<u> </u>	
PO Box	6241		When was the debt in	<u> </u>	
Number	Street		Contingent	e, the claim is: Check all that apply.	
			Unliquidated		
Sioux Fa	lls	SD 57117-6241	Disputed		
City	rred the debt?	State ZIP Code	Type of NONPRIORIT	ΓY unsecured claim:	
	r 1 only	Check one.	Student loans		
Debto	r 2 only			g out of a separation agreement or divorce port as priority claims	
	r 1 and Debtor 2 st one of the deb	•	☐ Debts to pension	or profit-sharing plans, and other similar debts	
ш		for a community debt	Other. Specify Credit Card		
	m subject to off		Credit Card		
☑ No	•				
☐ Yes					
4.20					\$3,578.00
Citibank			Last 4 digits of accor	unt number 0 7 0 5	
Nonpriority (Creditor's Name		When was the debt in		
Number	Street		As of the date you fil	e, the claim is: Check all that apply.	
			Contingent		
			Unliquidated Disputed		
Sioux Fa	lls	SD 57117-6241 State ZIP Code	_ _ _		
•	rred the debt?	Check one.	Type of NONPRIORIT	ı Y unsecured claim:	
	r 1 only		Student loans Obligations arising	g out of a separation agreement or divorce	
	r 2 only r 1 and Debtor 2	only	that you did not re	port as priority claims	
	st one of the deb		=	or profit-sharing plans, and other similar debts	
Check	c if this claim is	for a community debt	Credit Card		
	m subject to off	set?			
✓ No ☐ Yes					
⊔ 'ິ					

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Debtor 1	Iryna First Name	Middle Name	Litot Last Name	Case number (if known)	
Part 2:	Your NO	NPRIORITY Unsecu	red Claims Cont	inuation Page	
After listir		on this page, number the	m sequentially from th	ne	Total claim
4.21					\$7,405.00
Citibank			Last 4 digits of acc	ount number 1 6 0 2	
	Creditor's Name		When was the debt	incurred? 09/2013 and thereafter	
PO Box 6	Street		As of the date you	file, the claim is: Check all that apply.	
			_ Contingent		
			Unliquidated		
Sioux Fa	lls	SD 57117-6241	Disputed		
City	1.1. 1.1.0	State ZIP Code	Type of NONPRIOR	RITY unsecured claim:	
	rred the debt? r 1 only	Check one.	☐ Student loans		
<u> </u>	r 2 only			ng out of a separation agreement or divorce	
	r 1 and Debtor 2	only	•	report as priority claims n or profit-sharing plans, and other similar debts	
At leas	st one of the del	otors and another	Other. Specify	To profit offamily plans, and other offiniar debte	
☐ Check	t if this claim is	for a community debt	Credit Card		
Is the clai	m subject to of	fset?			
☑ No					
Yes					
4.22					\$1,094.00
Citibank			Last 4 digits of acc	ount number 0 0 4 0	
	Creditor's Name		When was the debt		
PO Box 6	Street		As of the date you	file, the claim is: Check all that apply.	
			_	, стания стания стру	
			Unliquidated		
Sioux Fa	lls	SD 57117-6241	Disputed		
City		State ZIP Code	Type of NONPRIOR	RITY unsecured claim:	
	red the debt?	Check one.	Student loans		
<u> </u>	r 1 only r 2 only			ng out of a separation agreement or divorce	
	r 1 and Debtor 2	only	•	report as priority claims	
		otors and another	= ~	n or profit-sharing plans, and other similar debts	
Check	if this claim is	for a community debt	Credit Card		
_	m subject to of				
✓ No					
☐ Yes					
4.23					Unknown
Comenity	y Bank		Last 4 digits of acc	ount number x x x 2	
	reditor's Name		When was the debt	_ _ _ _ _ _ _ _	
PO Box 1	Street		As of the date you	file, the claim is: Check all that apply.	
			_ Contingent	• • • • • • • • • • • • • • • • • • • •	
			Unliquidated		
Columbu	is	OH 43218-2273	Disputed		
City		State ZIP Code	Type of NONPRIOR	RITY unsecured claim:	
	red the debt?	Check one.	Student loans		
	r 1 only r 2 only			ng out of a separation agreement or divorce	
_	r 1 and Debtor 2	only	•	report as priority claims	
		otors and another	Other. Specify	n or profit-sharing plans, and other similar debts	
_ Check	t if this claim is	for a community debt	Credit Card		
	m subject to of	fset?			
✓ No					
☐ Yes					

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Debtor 1	Iryna		Litot	Case number (if known)	
	First Name	Middle Name	Last Name		
Part 2:	Your NO	NPRIORITY Unsecu	red Claims Conti	nuation Page	
After listing	-	n this page, number the	em sequentially from the)	Total claim
4.24	F-13-1				\$3,596.00
Comenity			Last 4 digits of accor	unt number <u>9 7 4 0</u>	
Nonpriority (Creditor's Name		When was the debt in	ncurred? 10/2015 and thereafter	
Number	Street		As of the date you fil	e, the claim is: Check all that apply.	
Calumahu		OII 42240 2272	Disputed		
Columbu	ıs	OH 43218-2273 State ZIP Code	Type of NONPRIORI	TV unsecured claim:	
Who incu	rred the debt?	Check one.	Student loans	i i unsecureu ciaini.	
<u> </u>	r 1 only			g out of a separation agreement or divorce	
ш	r 2 only r 1 and Debtor 2	only	•	eport as priority claims	
	st one of the deb	•	=	or profit-sharing plans, and other similar debts	
☐ Check	c if this claim is	for a community debt	Other. Specify Credit Card		
Is the clai	m subject to off	set?	0.00.00		
☑ No					
Yes					
4.25					\$1,234.00
Comenity	v Bank		Last 4 digits of accor	unt number 1 2 0 0	
Nonpriority (Creditor's Name		When was the debt in		
PO Box 1	1822/3 Street		As of the date you fil	e, the claim is: Check all that apply.	
			_	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
			Unliquidated		
Columbu	ıs	OH 43218-2273	Disputed		
City		State ZIP Code	Type of NONPRIORI	TY unsecured claim:	
— D. I.	rred the debt? r 1 only	Check one.	☐ Student loans		
<u>. </u>	r 2 only			g out of a separation agreement or divorce	
	r 1 and Debtor 2	only		eport as priority claims or profit-sharing plans, and other similar debts	
ш		tors and another	Other. Specify	or prome driaming plants, and outlet diffinal debte	
☐ Check	cif this claim is	for a community debt	Credit Card		
	m subject to off	set?			
✓ No ☐ Yes					
4.26					\$7,466.00
	Financial Ser	vices	Last 4 digits of accord	unt number <u>2</u> <u>0</u> <u>8</u> <u>8</u>	
PO Box 1	Creditor's Name		When was the debt is	ncurred? 08/2014 and thereafter	
Number	Street		As of the date you fil	e, the claim is: Check all that apply.	
			Disputed		
Wilmingt City	on	DE 19850-5316 State ZIP Code			
-	rred the debt?	Check one.	Type of NONPRIORI	ı y unsecurea cıaım:	
	r 1 only		Student loans Obligations arising	g out of a separation agreement or divorce	
ш	r 2 only	to		eport as priority claims	
	r 1 and Debtor 2 st one of the deb	•	·	or profit-sharing plans, and other similar debts	
ш		for a community debt	Other. Specify		
_	m subject to off	-	Credit Card		
No No	subject to on	JUL :			
Yes					

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Debtor 1 Iryna	NA:-I	dia Niana	Litot	Case number (if known)	
First Name	IVIIQ	dle Name	Last Name		
Part 2: Your N	NONPRIORI [*]	ΓY Unsecu	red Claims Con	tinuation Page	
After listing any entrie previous page.	es on this page	, number the	m sequentially from th	he	Total claim
4.27					\$2,074.00
First Merit Bank			Last 4 digits of acc	count number 1 0 4 2	
Nonpriority Creditor's Name 501 West North Ave			When was the debt	t incurred? 10/2015 and thereafter	
Number Street	ilue		As of the date you	file, the claim is: Check all that apply.	
Molroco Bork		0160 0000	Disputed		
Melrose Park City		0160-0000 P Code	Type of NONPRIOR	RITY unsecured claim:	
Who incurred the deb	t? Check on	Э.	Student loans	arr anosarsa sam.	
Debtor 1 only				ing out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor	or 2 only		•	report as priority claims	
At least one of the	•	other	=	on or profit-sharing plans, and other similar debts	
Check if this clain	n is for a comn	nunity debt	Credit Card		
Is the claim subject to	offset?				
☑ No					
Yes					
4.28					\$8,846.00
Kay Jewelers			Last 4 digits of acc	count number 7 3 0 6	
Nonpriority Creditor's Name PO Box 1799)		When was the debt	t incurred? 10/2015 and thereafter	
Number Street			As of the date you	file, the claim is: Check all that apply.	
			_ Contingent		
			Unliquidated Disputed		
Akron		4309-1799	_ Disputed		
City Who incurred the deb		P Code	Type of NONPRIOR	RITY unsecured claim:	
Debtor 1 only	ti Oncor on	·.	Student loans		
Debtor 2 only				ing out of a separation agreement or divorce report as priority claims	
Debtor 1 and Debto	-	a tha r	•	on or profit-sharing plans, and other similar debts	
At least one of the			Other. Specify		
Check if this claim		iunity debt	Credit Card		
Is the claim subject to No	onset?				
Yes					
4.29					Unknown
Kohls/Capone			Last 4 digits of acc	count number 1 3 5 2	
Nonpriority Creditor's Name)		When was the debt		
PO Box 3115 Number Street				file, the claim is: Check all that apply.	
Number Street			_ Contingent	me, me dami is. Shook all that apply.	
			Unliquidated		
Milwaukee		3201-0000	Disputed		
City Who incurred the deb		P Code	Type of NONPRIOR	RITY unsecured claim:	
Who incurred the deb Debtor 1 only	t? Check on	.	Student loans	to a set of a second second	
Debtor 2 only				ing out of a separation agreement or divorce report as priority claims	
Debtor 1 and Debto	•		•	on or profit-sharing plans, and other similar debts	
At least one of the			Other. Specify		
Check if this clain		nunity debt	Credit Card		
Is the claim subject to No	offset?				
✓ No Yes					

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Debtor 1	Iryna		Litot Case number (if known)	
	First Name	Middle Name	Last Name	
Part 2:	Your NO	NPRIORITY Unsecu	red Claims Continuation Page	
After listin	•	on this page, number the	m sequentially from the	Total claim
4.30	age.			\$2,819.00
Law Offic	e of Nettie Sa	abin	Last 4 digits of account number n o n e	
Nonpriority C PO Box 1	reditor's Name		When was the debt incurred? 2016	
Number	Street		As of the date you file, the claim is: Check all that apply.	
			_ Contingent	
			Unliquidated	
Chicago		IL 60618	Disputed	
City		State ZIP Code	Type of NONPRIORITY unsecured claim:	
- Dalatan	red the debt?	Check one.	Student loans	
✓ Debtor	1 only		Obligations arising out of a separation agreement or divorce	
ш .	1 and Debtor 2	only	that you did not report as priority claims	
_		otors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check	if this claim is	for a community debt	✓ Other. Specify legal fees	
Is the clair	n subject to off	set?		
☑ No	•			
Yes				
4.31				*
				\$1,522.00
	reditor's Name		_ Last 4 digits of account number <u>0 2 3 3</u>	
PO Box 4			When was the debt incurred? 11/2015 and thereafter	
Number	Street		As of the date you file, the claim is: Check all that apply.	
			☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
			— ☐ Disputed	
Beaverto	n	OR 97076		
City Who incur	red the debt?	State ZIP Code Check one.	Type of NONPRIORITY unsecured claim:	
	1 only	Check one.	Student loans Obligations origing out of a constation agreement or diverse	
Debtor	2 only		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
_	1 and Debtor 2	•	Debts to pension or profit-sharing plans, and other similar debts	
ш		otors and another	☑ Other. Specify	
ш.		for a community debt	Credit Card	
	n subject to off	iset?		
✓ No ☐ Yes				
4.32				\$9,698.00
Macy's B	ankruptcy Pro	ocessing	Last 4 digits of account number 0 5 2 6	
Nonpriority C	reditor's Name		When was the debt incurred? 02/2009 and thereafter	
PO Box 8	Street		As of the date you file, the claim is: Check all that apply.	
			_	
			Unliquidated	
Mason		OH 45040-0000	Disputed	
City		State ZIP Code	Type of NONPRIORITY unsecured claim:	
	red the debt?	Check one.	Student loans	
✓ Debtor Debtor	•		Obligations arising out of a separation agreement or divorce	
_	1 and Debtor 2	only	that you did not report as priority claims	
_		otors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check	if this claim is	for a community debt	✓ Other. Specify Credit Card	
Is the clair	n subject to off	set?		
☑ No	-			
☐ Yes				

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After listing any entries on this page, number them sequentially from the previous page. 4.33 Anordstrom Bank	Debtor 1	Iryna	No. 1 II. N	Litot	Case number (if known)	
After listing any entries on this page, number them sequentially from the previous page. 33		First Name	Middle Name	Last Name		
Last 4 digits of account number 3 7 1 1 Monorative Name Special Calam	Part 2:	Your NC	NPRIORITY Unsecu	red Claims Conti	nuation Page	
Last 4 digits of account number 3		•	on this page, number the	m sequentially from th	е	Total claim
Nompriories Name	4.33	-				\$2,271.00
Nomber Street Street State ZPConte S				_ Last 4 digits of acco	ount number <u>3</u> <u>7</u> <u>1</u> <u>1</u>	
Contingent Delay D				When was the debt	incurred? <u>07/2014 and thereafter</u>	
Disputed	Number	Street		As of the date you f	le, the claim is: Check all that apply.	
Phoenix AZ 85662-9137 City City City Check one. City Check one. City Check one. Check on				—		
Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Debtor 3 and Debtor 4 and Debtor 4 and Debtor 5 and another Debtor 5 and another Debtor 5 and Debtor 5 and 3 another Debtor 5 and Debtor 5 and 3 another Debtor 5 and 5 another 5	Phoenix		AZ 85062-9137	Disputed		
Student loans Debtor 1 only Debtor 2 only Debtor 1 and Debtor 3 only Debtor 1 and Debtor 3 only Debtor 1 only Debtor 1 and Debtor 4 only Debtor 1 only Debtor 2 only Nonpriority Creditor's Name Debtor 1 only Debtor 2 only Debtor 1 only Nonpriority Creditor's Name Debtor 1 only Debtor 2 only Nonpriority Creditor's Name Debtor 1 only Debtor 2 only Nonpriority Creditor's Name Debtor 1 only Debtor 2 only Nonpriority Creditor's Name Debtor 2 only Debtor 2 only Nonpriority Creditor's Name Debtor 3 only Nonpriority Creditor's Name	City			Type of NONPRIOR	TY unsecured claim:	
Debtor 2 only			Check one.	Student loans		
Debtor 1 and Debtor 2 only	<u> </u>	•			•	
A least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? Other. Specify Credit Card Card	=	•	2 only	•		
Credit Card	=			= ~;	or profit-sharing plans, and other similar debts	
A34 Personal Finance Last 4 digits of account number 6 0 1 3 Memory Street Stre	Check	if this claim is	s for a community debt			
Section Sect	Is the clai	m subject to o	ffset?			
A : 34 S\$6,698.00						
Last 4 digits of account number 6 0 1 3 3	Yes					
Personal Finance Last 4 digits of account number 6 0 1 3	4.34					\$6 698 00
Nonpriority Creditor's Name 11/2015 and thereafter 11/2015 and th	Personal	Finance		Last 4 digits of acco	ount number 6 0 1 3	Ψ0,030.00
As of the date you file, the claim is: Check all that apply.	Nonpriority C	Creditor's Name		_	 .	
Contingent Unliquidated Disputed						
Des Plaines Debtor 2 only	Number	Olicci			io, ino oram for oncox an max apply.	
Des Plaines IL 60016 City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ L 60123 City Yes 4.35 Personal Finance Nopprofity Creditor's Name 317 S. Melean Blvd Number Street □ Debtor 1 only □ Debtor 2 only □ L 60123 City State ZiP Code Who incurred the debtors and another □ Debtor 2 only □ Debtor 1 only □ Debtor 1 only □ Debtor 2 only □ Debtor 1 only □ Debtor 2 only □ Debtor 1 only □ Debtor 1 only □ Debtor 1 only □ Debtor 1 only □ Debtor 2 only □ Debtor 1 only □ Debtor 1 only □ Debtor 1 only □ Debtor 2 only □ Debtor 1 only □ Debtor 1 only □ Debtor 1 only □ Debtor 1 only □ Debtor 2 only □ Debtor 1 only □ Debtor 2 only □ Debt				=		
Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 and Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 8 only Debtor 8 only Debtor 9 only Debto	Des Plair	165	II 60016	Disputed		
Who incurred the debt? Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify ☐ Credit Card ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify ☐ Credit Card ☐ Student loans ☐ Other. Specify ☐ Credit Card ☐ Student loans ☐ Other. Specify ☐ Credit Card ☐ Student loans ☐ Other. Specify ☐ Credit Card ☐ Student loans ☐ Other. Specify ☐ Contingent ☐ Unliquidated ☐ Disputed ☐ Disputed ☐ Debtor 1 only ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt ☐ Credit Card ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify ☐ Credit Card ☐ Credit Card ☐ Credit Card ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify ☐ Credit Card ☐ Cre	City	103		Type of NONPRIOR	TY unsecured claim:	
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No Yes Last 4 digits of account number 6 0 1 3 When was the debt incurred? 11/2015 and thereafter As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 and another Check if this claim is for a community debt is the claim subject to offset? No No No No Personal Finance Last 4 digits of account number 6 0 1 3 When was the debt incurred? 11/2015 and thereafter As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card			Check one.	· · · · · · · · · · · · · · · · · · ·		
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes □ No □ Yes □ Nopriority Creditor's Name 317 S. Melean Blvd Number Street □ Contingent □ Unliquidated □ Disputed □ Debtor 1 only □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 only Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No						
At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? Other. Specify Credit Card \$5,000.00 Personal Finance Last 4 digits of account number 6 0 1 3 Nonprority Creditor's Name 317 S. Melean Blvd Number Street Whon was the debt incurred? 11/2015 and thereafter As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NoNPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No No No No Credit Card Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Credit Card Debtor 1 card Credit Card Debtor 2 only Credit Card	□ ~		2 only	•		
Check if this claim is for a community debt Is the claim subject to offset? No Yes 4.35 Personal Finance Nonpriority Creditor's Name Number Street Elgin IL 60123 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No Credit Card Credit Card Credit Card Credit Card Credit Card Credit Card Stored Credit Card Credit Card Credit Card Stored Credit Card Credit Card Stored Credit Card Stored Credit Card Stored Credit Card Stored Stored Credit Card Stored Stored Check all that apply. Contingent Unliquidated Disputed Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	—		-	브 ~;; ; ;	or profit-sharing plans, and other similar debts	
No	☐ Check	if this claim is	s for a community debt			
\$5,000.00 Personal Finance Nonpriority Creditor's Name 317 S. Melean Blvd Number Street When was the debt incurred? 11/2015 and thereafter As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Elgin IL 60123 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No State Card State Card State Card State Card State Card As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Credit Card		m subject to o	ffset?			
#\$5,000.00 A						
Personal Finance Nonpriority Creditor's Name 317 S. Melean Blvd Number Street When was the debt incurred? 11/2015 and thereafter As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No No No Last 4 digits of account number 6 0 1 1 3 Nhen was the debt incurred? 11/2015 and thereafter As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	☐ res					
Personal Finance Nonpriority Creditor's Name 317 S. Melean Blvd Number Street When was the debt incurred? 11/2015 and thereafter As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Number Street As of the date you file, the claim is: Check all that apply. Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Credit Card	4.35					\$5.000.00
Nonpriority Creditor's Name 317 S. Melean Blvd Number Street Contingent Unliquidated Disputed Disputed Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt State Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	Personal	Finance		Last 4 digits of acco	ount number 6 0 1 3	
As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed				When was the debt		
Elgin IL 60123 City State ZIP Code Disputed Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☑ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? ☐ Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card				As of the date you f	le, the claim is: Check all that apply.	
Elgin IL 60123 City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? ✓ No						
Elgin IL 60123 City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? ✓ No				—		
Who incurred the debt? Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ No	Elgin			_ Disputed		
 ☑ Debtor 1 only ☑ Debtor 2 only ☑ Debtor 1 and Debtor 2 only ☑ At least one of the debtors and another ☑ Check if this claim is for a community debt Is the claim subject to offset? ☑ No Student loans ○ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ○ Debts to pension or profit-sharing plans, and other similar debts ○ Other. Specify Credit Card 		red the deht?		Type of NONPRIOR	TY unsecured claim:	
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card			OHOUR OHG.		and at a company of the company of t	
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No	Debto	r 2 only		_ `	•	
☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ No	Debtor			•		
Is the claim subject to offset? ✓ No	ш			Other. Specify		
☑ No	_		-	Credit Card		
		m subject to o	ffset?			
☐ Yes						

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Debtor 1	Iryna		Litot	Case number (if known)	
	First Name	Middle Name	Last Name	· · · · · · · · · · · · · · · · · · ·	
Part 2:	Your NON	PRIORITY Unsecu	red Claims Contir	nuation Page	
	• •	this page, number the	em sequentially from the		Total claim
previous	page.				
4.36			Land A. Hadda of access		\$5,115.00
	I Finance Creditor's Name		Last 4 digits of accou	 	
	ee Street		When was the debt in	e, the claim is: Check all that apply.	
Number	Street		Contingent	e, the Claim is. Check all that apply.	
			Unliquidated		
Des Plair	nes	IL 60016	Disputed		
City	and the debt?	State ZIP Code	Type of NONPRIORIT	Y unsecured claim:	
	rred the debt? r 1 only	Check one.	Student loans		
<u> </u>	r 2 only			g out of a separation agreement or divorce port as priority claims	
	r 1 and Debtor 2 o	•	•	or profit-sharing plans, and other similar debts	
ш	st one of the debt	or a community debt	Other. Specify		
ш.	m subject to offs		Credit Card		
✓ No	in subject to one				
Yes					
4.37					\$2,105.00
Synchro	nv Bank		Last 4 digits of accou	unt number 5 9 0 7	φ2,103.00
Nonpriority (Creditor's Name		When was the debt in		
PO Box 9	Street		As of the date you file	e, the claim is: Check all that apply.	
			Contingent		
			Unliquidated Disputed		
Orlando		FL 32896-5007			
City Who incu	rred the debt?	State ZIP Code Check one.	Type of NONPRIORIT	Y unsecured claim:	
	r 1 only		Student loans Obligations arising	g out of a separation agreement or divorce	
	r 2 only r 1 and Debtor 2 o	nnly		port as priority claims	
ш	st one of the debt	•	= ~ ~	or profit-sharing plans, and other similar debts	
Check	c if this claim is f	or a community debt	Credit Card		
Is the clai	m subject to offs	et?			
✓ No ☐ Yes					
4.38					\$900.00
Synchro			Last 4 digits of accou	ınt number <u>8 9 5 9</u>	
PO Box 9	Creditor's Name 965007		When was the debt in	ncurred? 10/2015 and thereafter	
Number	Street			e, the claim is: Check all that apply.	
Orlanda		El 22906 5007	Disputed		
Orlando City		FL 32896-5007 State ZIP Code	Type of NONPRIORIT	'Y unsecured claim:	
	rred the debt?	Check one.	Student loans		
	r 1 only r 2 only			g out of a separation agreement or divorce	
Debto	r 1 and Debtor 2 o	•	•	port as priority claims or profit-sharing plans, and other similar debts	
ш	st one of the debt		Other. Specify	g promise and a series are a series and a series are a series and a series and a series and a series and a series are a series and a series and a series are a series and a series and a series are a series and a series and a series are a series and a series and a series are a series and a series and a series are a series and a series are a series and a series are a se	
_		or a community debt	Credit Card		
Is the clai	m subject to offs	et?			
Yes					

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Debtor 1	Iryna		Litot	Case number (if known)	
	First Name	Middle Name	Last Name		
Part 2:	Your NO	IPRIORITY Unsecu	red Claims Contir	nuation Page	
After listin		n this page, number the	em sequentially from the		Total claim
4.39					\$878.00
Synchron			Last 4 digits of accou	unt number <u>1 8 2 8</u>	
Nonpriority C PO Box 9	reditor's Name		When was the debt in	ncurred? 11/2014 and thereafter	
Number	Street		As of the date you file	e, the claim is: Check all that apply.	
			ContingentUnliquidated		
Orlando		FL 32896-5007	Disputed		
City		State ZIP Code	Type of NONPRIORIT	Y unsecured claim:	
	red the debt?	Check one.	Student loans		
✓ Debtor Debtor	,		`	out of a separation agreement or divorce	
_	1 and Debtor 2	only	•	port as priority claims	
	t one of the debt	•	Other. Specify	or profit-sharing plans, and other similar debts	
☐ Check	if this claim is	or a community debt	Credit Card		
Is the clair	n subject to offs	set?			
☑ No					
Yes					
4.40					\$1,594.00
Synchror	nv Bank		Last 4 digits of accou	int number 1 9 3 8	<u> </u>
Nonpriority C	reditor's Name		When was the debt in		
PO Box 9	65007 Street		As of the date you file	e, the claim is: Check all that apply.	
	Circot		_ ☐ Contingent	o, and claim for one on an anat appry.	
			Unliquidated		
Orlando		FL 32896-5007	Disputed		
City		State ZIP Code	Type of NONPRIORIT	Y unsecured claim:	
— D.1.	red the debt?	Check one.	Student loans		
	1 only 2 only			out of a separation agreement or divorce	
	1 and Debtor 2	only		port as priority claims	
At leas	t one of the debt	ors and another	Other. Specify	or profit-sharing plans, and other similar debts	
☐ Check	if this claim is	or a community debt	Credit Card		
Is the clair	n subject to offs	set?			
☑ No					
Yes					
4.41					\$655.00
Synchron			Last 4 digits of accou	ınt number <u>7</u> <u>8</u> <u>1</u> <u>0</u>	
Nonpriority C PO Box 9	reditor's Name		When was the debt in	ncurred? 08/201 and thereafter	
Number	Street		As of the date you file	e, the claim is: Check all that apply.	
			_ Contingent		
			UnliquidatedDisputed		
Orlando		FL 32896-5007			
City Who incur	red the debt?	State ZIP Code Check one.	Type of NONPRIORIT	Y unsecured claim:	
	1 only	2.100K 0110.	Student loans	a out of a congression agreement or divers	
	2 only		_ `	gout of a separation agreement or divorce port as priority claims	
	1 and Debtor 2	•	•	or profit-sharing plans, and other similar debts	
☐ At leas	t one of the debt	ors and another	Other. Specify		
ш		or a community debt	Credit Card		
	n subject to offs	set?			
✓ No ☐ Yes					

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Debtor 1	Iryna	Middle Nove	Litot	Case number (if known)	
	First Name	Middle Name	Last Name		
Part 2:	Your NC	NPRIORITY Unsecu	red Claims Conti	nuation Page	
After listin		on this page, number the	em sequentially from the	9	Total claim
4.42	_				\$1,644.00
Synchroi			Last 4 digits of acco	ount number <u>6</u> <u>1</u> <u>1</u> <u>7</u>	
PO Box 9	Creditor's Name		When was the debt		
Number	Street		As of the date you fi	le, the claim is: Check all that apply.	
			☐ Contingent☐ Unliquidated		
Orlando		FL 32896-5007	— ☐ Disputed		
City		State ZIP Code	Type of NONPRIORI	TY unsecured claim:	
	red the debt?	Check one.	Student loans		
<u> </u>	r 1 only r 2 only			g out of a separation agreement or divorce	
ш .	r 1 and Debtor 2	2 only	•	eport as priority claims or profit-sharing plans, and other similar debts	
	st one of the de	btors and another	Other. Specify	or profit-straining plants, and other similar debts	
☐ Check	if this claim is	s for a community debt	Credit Card		
Is the clair	m subject to o	ffset?			
☑ No					
Yes					
4.43					\$565.00
Synchro	nv Bank		Last 4 digits of acco	ount number 9 2 4 1	
Nonpriority C	Creditor's Name		When was the debt		
PO Box 9	965007 Street			le, the claim is: Check all that apply.	
	Circot		_	io, ino ciami ior chican and apply.	
			Unliquidated		
Orlando		FL 32896-5007	— ☐ Disputed		
City		State ZIP Code	Type of NONPRIORI	TY unsecured claim:	
	red the debt?	Check one.	Student loans		
	r 1 only r 2 only			g out of a separation agreement or divorce	
	r 1 and Debtor 2	2 only		eport as priority claims	
_		btors and another	Other. Specify	or profit-sharing plans, and other similar debts	
☐ Check	if this claim is	s for a community debt	Credit Card		
	m subject to o	ffset?			
✓ No					
Yes					
4.44					\$515.00
Synchro	ny Bank		Last 4 digits of acco	ount number 5 9 6 4	
	Creditor's Name		When was the debt	incurred? 10/2015 and thereafter	
PO Box 9	Street		As of the date you fi	le, the claim is: Check all that apply.	
			_ Contingent		
			Unliquidated		
Orlando		FL 32896-5007	Disputed		
City	rod the debte	State ZIP Code	Type of NONPRIOR	TY unsecured claim:	
	red the debt? r 1 only	Check one.	Student loans		
	r 2 only			g out of a separation agreement or divorce eport as priority claims	
Debto	r 1 and Debtor 2	•	•	or profit-sharing plans, and other similar debts	
ш		btors and another	Other. Specify		
_		s for a community debt	Credit Card		
	m subject to o	ffset?			
✓ No ☐ Yes					
∟ . ~~					

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Debtor 1	Iryna		Litot	Case number (if known)	
	First Name	Middle Name	Last Name	· · · · · · · · · · · · · · · · · · ·	
Part 2:	Your NON	PRIORITY Unsecu	red Claims Contin	uation Page	
After listin	ng any entries on	this page, number the	em sequentially from the		Total claim
previous	page.				i otai ciaiiii
4.45					\$9,305.00
Synchro	ny Bank Creditor's Name		Last 4 digits of accou	int number <u>9</u> <u>9</u> <u>2</u> <u>2</u>	
PO Box 9			When was the debt in		
Number	Street			e, the claim is: Check all that apply.	
			∐ Contingent ☐ Unliquidated		
Orlando		FL 32896-5007	Disputed		
City		State ZIP Code	Type of NONPRIORIT	Y unsecured claim:	
B. I. (rred the debt?	Check one.	Student loans		
	r 1 only r 2 only			out of a separation agreement or divorce	
	r 1 and Debtor 2 c	nly		port as priority claims or profit-sharing plans, and other similar debts	
At leas	st one of the debto	ors and another	Other. Specify	r prom onamig plane, and onle online doole	
ш		or a community debt	Credit Card		
	m subject to offs	et?			
✓ No ☐ Yes					
4.46					\$6,875.00
Synchro Nonpriority (ny Bank Creditor's Name		Last 4 digits of accou		
PO Box 9	965007		When was the debt in	<u> </u>	
Number	Street		_ Contingent	e, the claim is: Check all that apply.	
			Unliquidated		
Orlando		FL 32896-5007	─ ☐ Disputed		
City	and the debt?	State ZIP Code	Type of NONPRIORIT	Y unsecured claim:	
	rred the debt? r 1 only	Check one.	Student loans		
<u> </u>	r 2 only			out of a separation agreement or divorce port as priority claims	
	r 1 and Debtor 2 c st one of the debto	•		or profit-sharing plans, and other similar debts	
_		or a community debt	Other. Specify		
	m subject to offs		Credit Card		
✓ No	,				
Yes					
4.47					\$962.00
Synchro	nv Bank		Last 4 digits of accou	int number 8 6 1 0	ΨουΣ.ου
Nonpriority (Creditor's Name		When was the debt in		
PO Box 9	Street		As of the date you file	e, the claim is: Check all that apply.	
			_ Contingent		
			UnliquidatedDisputed		
Orlando City		FL 32896-5007 State ZIP Code	_ _ .		
-	rred the debt?	Check one.	Type of NONPRIORIT	Y unsecured claim:	
	r 1 only		☐ Student loans ☐ Obligations arising	out of a separation agreement or divorce	
	r 2 only r 1 and Debtor 2 c	inly	that you did not rep	port as priority claims	
	st one of the debto	•		or profit-sharing plans, and other similar debts	
Check	c if this claim is f	or a community debt	✓ Other. Specify Credit Card		
Is the clai	m subject to offs	et?			
✓ No ☐ Yes					
⊔ '53					

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Debtor 1	Iryna		Litot	Case number (if known)	
	First Name	Middle Name	Last Name		
Part 2:	Your NO	NPRIORITY Unsecu	red Claims Conti	nuation Page	
After listin		on this page, number the	m sequentially from the	•	Total claim
4.48					\$2,144.00
Synchron	ny Bank		Last 4 digits of acco	unt number 6 1 2 0	
Nonpriority C	reditor's Name		When was the debt in	ncurred? 11/2015 and thereafter	
PO Box 9 Number	Street		As of the date you fil	le, the claim is: Check all that apply.	
			_ Contingent		
			Unliquidated Disputed		
Orlando		FL 32896-5007			
City Who incur	red the debt?	State ZIP Code Check one.	Type of NONPRIORI	TY unsecured claim:	
	1 only		Student loans Obligations arising	g out of a separation agreement or divorce	
	2 only			eport as priority claims	
	1 and Debtor 2	only otors and another		or profit-sharing plans, and other similar debts	
ш		for a community debt	Other. Specify Credit Card		
_	m subject to of	•	Credit Card		
✓ No	,				
Yes					
4.49					\$931.00
Synchroi	ny Bank		Last 4 digits of acco	unt number 2 0 3 6	φ931.00
Nonpriority C	reditor's Name		When was the debt in		
PO Box 9	065007 Street			le, the claim is: Check all that apply.	
			_ Contingent	.,	
			Unliquidated		
Orlando		FL 32896-5007	Disputed		
City Who incur	red the debt?	State ZIP Code Check one.	Type of NONPRIORI	TY unsecured claim:	
	1 only	CHECK OHE.	Student loans		
Debtor	2 only			g out of a separation agreement or divorce	
ш	1 and Debtor 2	only otors and another	•	or profit-sharing plans, and other similar debts	
ш		for a community debt	Other. Specify		
	m subject to of		Credit Card		
✓ No	,	·==••			
Yes					
4.50					\$449.00
	ational Bank		Last 4 digits of acco	unt number <u>7 4 0 9</u>	
	reditor's Name /zata Bouleva	nrd	When was the debt i	ncurred? <u>07/2014 and thereafter</u>	
Number	Street			le, the claim is: Check all that apply.	
			Disputed		
Minneapo City	olis	MN 55416-0000 State ZIP Code	Type of NONDBIODI	TV unsecured claim:	
	red the debt?	Check one.	Type of NONPRIORI Student loans	i i unsecureu cidiili.	
	1 only			g out of a separation agreement or divorce	
ш	· 2 only · 1 and Debtor 2	only	•	eport as priority claims	
		otors and another	= ~,	or profit-sharing plans, and other similar debts	
Check	if this claim is	for a community debt	Credit Card		
	m subject to of	fset?			
☑ No □ Yes					

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Debtor 1	Iryna		Litot	Case number (if known)	
	First Name	Middle Name	Last Name		
Part 2:	Your NONPE	RIORITY Unsecu	ıred Claims Contii	nuation Page	
After listin	•	is page, number the	em sequentially from the		Total claim
4.51					\$20,157.00
US Depa	rtment of Educati	on	Last 4 digits of accor	ınt number 8 8 7 9	
Nonpriority C	Creditor's Name		When was the debt in		
Number	cker Street Street		As of the date you fil	e, the claim is: Check all that apply.	
	3.1001		☐ Contingent	-,	
			Unliquidated		
Utica	N,	Y 13501-0000	Disputed		
City	Sta		Type of NONPRIORI	TY unsecured claim:	
Who incur	rred the debt? Ch	neck one.	Student loans	T diiscource olaiii.	
<u> </u>	r 1 only		<u> </u>	g out of a separation agreement or divorce	
ш	r 2 only r 1 and Debtor 2 only	,	that you did not re	port as priority claims	
	st one of the debtors		<u> </u>	or profit-sharing plans, and other similar debts	
ш	c if this claim is for		Other. Specify		
_	m subject to offset?	•			
✓ No	in subject to onset:				
Yes					
4.52					\$3,063.00
	Foremost Bank		Last 4 digits of accor	unt number <u>0 0 6 8</u>	
	Creditor's Name 7 1st St, Ste. 300		When was the debt in	ncurred? 11/2015 and thereafter	
Number	Street		As of the date you fil	e, the claim is: Check all that apply.	
			Contingent		
			Unliquidated		
Lincoln	NI	E 68521	Disputed		
City	Sta		Type of NONPRIORIT	TY unsecured claim:	
		neck one.	☐ Student loans		
	r 1 only r 2 only			g out of a separation agreement or divorce	
ш	r 1 and Debtor 2 only	,	•	port as priority claims	
At leas	st one of the debtors	and another		or profit-sharing plans, and other similar debts	
Check	c if this claim is for	a community debt	✓ Other. Specify Credit Card		
_	m subject to offset?	?			
√ No	•				
Yes					

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Debtor 1	Iryna First Name	Middle Name	Litot Last Name	C	ase number (if known)				
	FIRST Name	Middle Name	Last Name						
Part 3:	List Others t	o Be Notified Al	oout a Debt That You	ı Already	Listed				
For e credi debts	xample, if a collection to reaction to the target to the target and the target to the target and the target to the target to the target target to the target	on agency is trying nen list the collection arts 1 or 2, list the a	to collect from you for a on agency here. Similarly additional creditors here.	debt you ov /, if you hav	debt that you already listed in Parts 1 or 2. we to someone else, list the original e more than one creditor for any of the not have additional parties to be notified for				
ABT Elec	ctronics		On which entry in I	On which entry in Part 1 or Part 2 did you list the original creditor?					
Name 1200 N. N	Milwaukee Avenue	.	 Line 4.37 of <i>(Ch</i>	heck one):	Part 1: Creditors with Priority Unsecured Claims				
Number	Street				Part 2: Creditors with Nonpriority Unsecured Claims				
			—— Last 4 digits of acc	count numb	er				
Glenview City		_ 60025-0000 tate ZIP Code	_						
Comenity	y Bank		On which entry in I	Part 1 or Pa	rt 2 did you list the original creditor?				
	ston Square Place		Lineof (Ch	heck one):	Part 1: Creditors with Priority Unsecured Claims				
Number	Street				Part 2: Creditors with Nonpriority Unsecured Claims				
			—— Last 4 digits of acc	count numb	er				
Columbu City		OH 43219-0000 tate ZIP Code			<u> </u>				
,									
DSNB Name			On which entry in I	Part 1 or Pa	rt 2 did you list the original creditor?				
PO Box 8 Number	Street		Line <u>4.32</u> of <i>(Ct</i>		□ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims				
					Part 2: Creditors with Nonpriority Unsecured Claims				
Mason	C)H 45040	Last 4 digits of acc	count numb	er				
City	S	tate ZIP Code							
Nordstro	om FSB		On which entry in I	Part 1 or Pa	rt 2 did you list the original creditor?				
PO Box 1	13589		Line 4.33 of (Ch	heck one):	Part 1: Creditors with Priority Unsecured Claims				
Number	Street				Part 2: Creditors with Nonpriority Unsecured Claims				
			—— Last 4 digits of acc	count numb	er				
Scottsda City		85267-3589 tate ZIP Code	_						
- 7									
TD Bank Name			On which entry in I	Part 1 or Pa	rt 2 did you list the original creditor?				
	Street		Line <u>4.50</u> of (Ch	heck one):	Part 1: Creditors with Priority Unsecured Claims				
					Part 2: Creditors with Nonpriority Unsecured Claims				
Lowists	<u> </u>	NE 04040.0000	—— Last 4 digits of acc	count numb	er				
Lewiston City		1E 04240-0000 tate ZIP Code							

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Debtor 1	Iryna		Litot	Case number (if known)		
	First Name	M	liddle Name	Last Name	· · · · · · · · · · · · · · · · · · ·	
Part 3:	List Others to Be Notified About		ut a Debt That You Alread	dy Listed Continuation Page		
TD Bank				On which entry in Part 1 or	Part 2 did you list the original creditor?	
Name 217 Main	Street			Line 4.50 of (Check one).	Part 1: Creditors with Priority Unsecured Claims	
Number	Street			_	Part 2: Creditors with Nonpriority Unsecured Claims	
				 Last 4 digits of account nun 	mber	
Lewiston		ME	04240-0000		<u>— — — —</u>	
City		State	ZIP Code			

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Debtor 1	Iryna		Litot	Case number (if known)	
	First Name	Middle Name	Last Name		

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims	6a.	Domestic support obligations	6a.	\$0.00
nomi art i	6b.	Taxes and certain other debts you owe the government	6b.	\$0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. 🛨	\$0.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$0.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$20,157.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	^{6i.} +	\$160,816.00
	6j.	Total. Add lines 6f through 6i.	6j.	\$180,973.00

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Fill in this in	formation to i							
Debtor 1	Iryna First Name	Middle Name	Litot Last Name	_				
Debtor 2 (Spouse, if filing		Middle Name	Last Name	_				
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS								
Case number (if known)					Check if this is an amended filing			

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease
 is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of
 executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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	II in this inf				•	
131	II IN this int	ormation to i	dentify your case:			
De	ebtor 1	Iryna First Name	Middle Norse	Litot Last Name		
		First Name	Middle Name	Last Name		
	ebtor 2	<u></u>	N.C. I. II. N.			
(5)	pouse, if filing)	First Name	Middle Name	Last Name		
Ur	nited States Bar	nkruptcy Court fo	r the: NORTHERN D	STRICT OF ILLINOIS		
Ca	se number					
	known)				Check if this is an	
İ					amended filing	
Off	icial Form	106H				
Sc	hedule H:	Your Cod	ebtors		1	2/15
pag	Do you have No Yes	any codebtors?	(If you are filing a joi	nt case, do not list either spous	,	
2.		•		• • • •	? (Community property states and territories as, Washington, and Wisconsin.)	
	☑ No. Go t					
	—	l your spouse, for	mer spouse, or legal ed	uivalent live with you at the tir	ne?	
	□ No					
_	Yes					
3.	person show creditor on S	n in line 2 again Schedule D (Offic	as a codebtor only if	hat person is a guarantor or dule E/F (Official Form 106E/	or if your spouse is filing with you. List the cosigner. Make sure you have listed the F), or Schedule G (Official Form 106G). Use	
	Column 1:	Your codebtor			Column 2: The creditor to whom you owe the de	ebt
					Check all schedules that apply:	

Official Form 106H Schedule H: Your Codebtors page 1

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	ill in this inforr	nation to i	dentify your case:					
	Debtor 1	Iryna		Litot				
	Dostor 1	First Name	Middle Name	Last Nar	ne		Che	eck if this is:
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Nar	~			An amended filing
	· · · · · · · · · · · · · · · · · · ·					ıe		A supplement showing postpetition
	United States Bank Case number	truptcy Court	for the: NORTHERN	I DISTRICT OF	ILLINO	<u> </u>	_	chapter 13 income as of the following date:
	(if known)							MM / DD / YYYY
0	fficial Form 10	061						
S	chedule I: Yo	our Incor	ne					12/15
res inc ab yo	sponsible for suppl clude information a out your spouse. I ur name and case	lying correct bout your sp f more space	information. If you ar pouse. If you are sepa e is needed, attach a s nown). Answer every	e married and n rated and your s eparate sheet to	ot filing j spouse is	ointly, and not filing v	your with y	I Debtor 2), both are equally spouse is living with you, rou, do not include information any additional pages, write
1.	Fill in your emplo	oyment						
	If you have more	than one		Debtor 1				Debtor 2 or non-filing spouse
	job, attach a sepa		Employment status	✓ Employe✓ Not empl				☐ Employed☐ Not employed
	additional employ		Occupation	recruiter	oycu			Not employed
	Include part-time, or self-employed		Employer's name	Advanced R	esource	es		-
	Occupation may i student or homen		Employer's address	Number Street			Number Street	
	applies.			Chicago				_
				City		State Zip Co	ode	City State Zip Code
			How long employed	there?				
	Part 2: Give I	Details Ah	out Monthly Incom	ne				
			· · · · · · · · · · · · · · · · · · ·		othing to	report for an	w line	e, write \$0 in the space. Include your
	n-filing spouse unles			m: II you nave II	ourning to	report for ar	iy iiiic	, whice wo in the space. Include your
			e more than one employ arate sheet to this form.		informatio	on for all em	ploye	rs for that person on the lines below. If
						For Debtor	1	For Debtor 2 or non-filing spouse
2.			alary, and commission I monthly, calculate wha		2. ge	\$3,35	0.00	
3.	Estimate and list	t monthly ov	ertime pay.		3. +	\$	0.00	
4.	Calculate gross	income. Ad	d line 2 + line 3.		4.	\$3,35	0.00	

Official Form 106I Schedule I: Your Income page 1

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Deb	tor 1	<u>Iryna</u> <u>Litot</u>		Case nu	mber (if known)		
		First Name Middle Name Last Name		For Debtor 1	For Debtor 2 or non-filing spouse	<u>. </u>	
	Сор	y line 4 here	4 .	\$3,350.00			
5.	_	all payroll deductions:					
		Tax, Medicare, and Social Security deductions	5a.	\$0.00			
	5b.	Mandatory contributions for retirement plans	5b.	\$0.00			
	5c.	Voluntary contributions for retirement plans	5c.	\$0.00			
	5d.	Required repayments of retirement fund loans	5d.	\$0.00			
	5e.	Insurance	5e.	\$0.00			
	5f.	Domestic support obligations	5f.	\$0.00			
	_	Union dues	5g.	\$0.00			
	5h.	Other deductions. Specify:	5h. +	\$0.00			
6.	Add 5g +	the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5h$.	6.	\$0.00			
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4	. 7.	\$3,350.00			
8.	List	all other income regularly received:					
	8a.	Net income from rental property and from operating a business, profession, or farm	8a.	\$0.00			
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.					
	8b.	Interest and dividends	8b.	\$0.00			
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$250.00			
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.					
	8d.	Unemployment compensation	8d.	\$0.00			
	8e.	Social Security	8e.	\$0.00			
	8f.	Other government assistance that you regularly receive					
		Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.					
		Specify:	8f.	\$0.00			
	8g.	Pension or retirement income	8g.	\$0.00			
	8h.	Other monthly income.					
		Specify:	8h. +	- \$0.00			
9.	Add	all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	. 9.	\$250.00			
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$3,600.00	+	= \$3,600.00	
11.	1. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.						
	Do r	not include any amounts already included in lines 2-10 or amounts the	nat are n	ot available to pay	expenses listed in Sc		
	Spe	cify:			11.	+\$0.00	
12.	inco	the amount in the last column of line 10 to the amount in line 11 me. Write that amount on the Summary of Your Assets and Liabilities applies.				\$3,600.00 Combined monthly income	
13.	Doy	ou expect an increase or decrease within the year after you file	this for	rm?		•	
		No. Yes. Explain: None.					

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F	ill in this inform	nation to ider	ntify your case:			Cha	ok if this	ic:		
	Debtor 1	Iryna		Litot		Check if this is: An amended filing				
	200.0.	First Name	Middle Name	Last Na	ame	\parallel		ement showing	postpetition	
1	Debtor 2					_	chapter followin	13 expenses a	as of the	
	(Spouse, if filing)	First Name	Middle Name	Last Na	ame		TOHOWITI	y uat e .		
	United States Bankı	ruptcy Court for the	he: NORTHERN DI	STRICT O	F ILLINOIS		MM / DI	D / YYYY		
	Case number (if known)									
<u>O</u> 1	fficial Form 10	<u> 165</u>								
S	chedule J: Yo	our Expens	ses						1	12/15
cor	rect information. I	f more space is	ible. If two married peneeded, attach anothenswer every question. sehold	er sheet to						
1.	Is this a joint cas	e?								
2.	_ No	Debtor 2 live in a	separate household? tille Official Form 106J-	·2, Expense	es for Separate House	hold o	f Debtor :	2.		
	Do not list Debtor	_	Yes. Fill out this inf for each dependent		Dependent's relati Debtor 1 or Debtor	onshi 2	p to	Dependent's age	Does deper	
	Debtor 2.		Tor caon appoindon		child			1	□ No	
	Do not state the de	ependents'							− 📝 Yes 🞵 No	
	names.								- Yes	
									□ No	
					-				− □ Yes	
									□ No □ Yes	
									☐ No	
									− □ Yes	
3.	Do your expense expenses of peop yourself and you	ole other than	✓ No ☐ Yes							
P	art 2: Estima	ate Your Ong	oing Monthly Exp	enses						
to ı	timate your expens	es as of your ba of a date after t	ankruptcy filing date u	nless you a	-			-		
	•		ash government assis on Schedule I: Your Ir	-				Your expen	ses	
4.			openses for your resid any rent for the grour				4	l	\$50	0.00
	If not included in	0 , ,								
	4a. Real estate ta	axes					4	ŀa		
	4b. Property, hor	neowner's, or ren	nter's insurance				4	lb		
	4c. Home mainte	nance, repair, ar	nd upkeep expenses				4	lc	\$7	5.00
	4d. Homeowner's	association or c	condominium dues				4	ld		

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Debto	or 1 Iryna		Litot	_ Case number (if known	ı)
	First Name	Middle Name	Last Name		
				You	r expenses
5.	Additional morto	gage payments for your reside	ence, such as home equity loans	5.	
6. I	Utilities:				
(6a. Electricity, h	eat, natural gas		6a.	
(6b. Water, sewe	r, garbage collection		6b.	
(Sc. Telephone, o	cell phone, Internet, satellite, an	d	6c.	\$220.00
(6d. Other. Spec	sify:		6d.	
7. I	Food and house	keeping supplies		7.	\$700.00
8. (Childcare and cl	nildren's education costs		8.	\$800.00
9. (Clothing, laundr	y, and dry cleaning		9.	\$100.00
10. I	Personal care pr	oducts and services		10.	\$150.00
11. I	Medical and den	tal expenses		11.	\$50.00
		Include gas, maintenance, bus ude car payments.	12.	\$250.00	
	Entertainment, c	lubs, recreation, newspapers books	13.	\$150.00	
14. (Charitable contr	ibutions and religious donation	ons	14.	
	nsurance.				
		surance deducted from your pay	or included in lines 4 or 20.		
	15a. Life insura			15a.	
	15b. Health insu			15b.	\$100.00
•	15c. Vehicle ins			15c.	
•		rance. Specify:		15d.	
	Faxes.Do notSpecify:	•	ur pay or included in lines 4 or 20.	16.	
17. I	nstallment or le	ase payments:			
	17a. Car payme	ents for Vehicle 1		17a.	
	17b. Car payme	ents for Vehicle 2 student lo	ans	17b.	
	17c. Other. Spe	ecify: gym membership		17c.	\$250.00
	17d. Other. Spe	ecify:		17d.	\$95.00
		• • • • • • • • • • • • • • • • • • • •	support that you did not report as Your Income (Official Form 106I).		
		you make to support others v	vho do not live with you.		
,	Specify:			19.	

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Deb	tor 1	Iryna		Litot	Case numb	er (if known)	
		First Name	Middle Name	Last Name		`	
20.		er real property expenses edule I: Your Income.	s not included in line	s 4 or 5 of this form or	ron		
	20a.	Mortgages on other prop	perty			20a	
	20b.	Real estate taxes				20b	_
	20c.	Property, homeowner's,	or renter's insurance			20c.	
	20d.	Maintenance, repair, and	d upkeep expenses			20d	
	20e.	Homeowner's association	on or condominium du	ies		20e	
21.	Othe	er. Specify:				21	
22.	Calc	culate your monthly expe	enses.				
	22a.	Add lines 4 through 21.				22a	\$3,440.00
	22b.	Copy line 22 (monthly ex	expenses for Debtor 2)), if any, from Official Fo	rm 106J-2.	22b	
	22c.	Add line 22a and 22b.	The result is your mon	ithly expenses.		22c	\$3,440.00
23.	Calc	culate your monthly net in	ncome.			_	
	23a.	Copy line 12 (your comb	oined monthly income) from Schedule I.		23a	\$3,600.00
	23b.	Copy your monthly expe	enses from line 22c at	oove.		23b. _	\$3,440.00
	23c.	Subtract your monthly e The result is your month		onthly income.		23c	\$160.00
24.	Do y	ou expect an increase o	r decrease in your e	xpenses within the yea	ar after you file this form?	?	
	paym	example, do you expect to ment to increase or decrea No.		•	or do you expect your mo	rtgage	
		Yes. Explain here: None.					

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Debtor 1	Iryna		Litot		
	First Name	Middle Name	Last Name		
ebtor 2					
Spouse, if filing) First Name	Middle Name	Last Name		
nited States Ba	ankruptcy Court fo	or the: NORTHERN D	ISTRICT OF ILLINOIS		
ase number f known)				Check if to amended	
fficial Form	า 106Sum			-	
ummary o	f Your Asse	ets and Liabilit	ies and Certain Stat	istical Information	1:
	ou file your origi	, ,	ill out a new Summary and ch	heck the box at the top of this pa	age. Your assets
Schodulo A/A	B: <i>Property</i> (Officia	al Form 106A/B)			/alue of what you o
	, , ,	•	_		\$0
1a. Copy lin	e 55, Total real es	state, from Schedule A/	В		
1b. Copy lin	e 62, Total persor	nal property, from Sche	dule A/B		\$2,900
1c. Copy lin	e 63, Total of all p	property on Schedule A	/B		\$2,900
Part 2: Su	ımmarize You	ır Liabilities		-	
					Your liabilities Amount you owe
Schedule D:		•	Property (Official Form 106D) claim, at the bottom of the last	t page of Part 1 of Schedule D	\$0
	E. Craditara Mila		s (Official Form 106E/F)	pedulo E/E	\$0
2a. Copy the		n Part 1 (priority unsecu	red claims) from line 6e of Sch	ledule L/I	
2a. Copy the Schedule E/H 3a. Copy the	e total claims from	,, ,	,	Schedule E/F+	. \$180,973
2a. Copy the Schedule E/H 3a. Copy the	e total claims from	,, ,	,		

Schedule J: Your Expenses (Official Form 106J)

Copy your monthly expenses from line 22c of Schedule J.....

\$3,440.00

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Del	otor 1	Iryna		Litot	Case numb	er (if known)	
		First Name	Middle Name	Last Name		,	
P	art 4:	Answer Th	ese Questions fo	r Administrative a	nd Statistical Recor	ds	
6.	Are	you filing for bank	ruptcy under Chapter	s 7, 11, or 13?			
	_	No. You have noth Yes	ning to report on this pa	art of the form. Check th	nis box and submit this for	rm to the court with you	ur other schedules.
7.	Wha	t kind of debt do y	ou have?				
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.						
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.						
В.				<i>y Income:</i> Copy your to Line 11; OR , Form 122	otal current monthly incom C-1 Line 14.	e from	\$3,536.67
9.	Сору	y the following spe	ecial categories of cla	ims from Part 4, line 6	of Schedule E/F:		
						Total claim	
	Fron	n Part 4 on Sched	ule E/F, copy the follo	owing:			
	9a.	Domestic support	obligations. (Copy line	6a.)		\$0.00	<u>0</u>
	9b.	Taxes and certain	other debts you owe th	e government. (Copy lin	ne 6b.)	\$0.00	<u>0</u>
	9c.	Claims for death or	r personal injury while y	ou were intoxicated. (C	Copy line 6c.)	\$0.00	<u>0</u>

9d. Student loans. (Copy line 6f.)

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

9e. Obligations arising out of a separation agreement or divorce that you did not report as

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$20,157.00

\$20,157.00

\$0.00

\$0.00

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Fill in this information to identify your case: Debtor 1								
Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) Official Form 106Dec Declaration About an Individual Debtor's Schedules 12/15 If two married people are filling together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Pelition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.	Fill in this inf	ormation to i	dentify your case:	:				
Check if this is an amended filing Check if this is an amended filing	Debtor 1		Middle Name					
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) Official Form 106Dec Declaration About an Individual Debtor's Schedules 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.		First Name	Middle Name	Last Name				
Official Form 106Dec Declaration About an Individual Debtor's Schedules 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.			r the: NORTHERN D	ISTRICT OF ILLING	OIS			
Declaration About an Individual Debtor's Schedules 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.								an
If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.	Official Form	106Dec						
You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.	Declaration	About an I	ndividual Debt	or's Schedule	es			12/15
Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Iryna Litot X		•	to 20 years, or both.	18 U.S.C. §§ 152, 134	41, 1519, and	3571.		
Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Iryna Litot X	Did you pay o	or agree to pay s	someone who is NOT	an attorney to help y	ou fill out ba	nkruptcy forms?	•	
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Iryna Litot X	☑ No							
X /s/ Iryna Litot X	☐ Yes. Na	ame of person						
	true and corr	ect.	clare that I have read		chedules filed	l with this declar	ration and that the	ey are
					ebtor 2		_	

Date 11/03/2016

MM / DD / YYYY

Date

MM / DD / YYYY

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Fill in this ir	nformation to	identify your case	:		
Debtor 1	Iryna		Litot		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing	g) First Name	Middle Name	Last Name		
United States B	Sankruptcy Court f	or the: NORTHERN D	ISTRICT OF ILLINOIS		
Case number					
(if known)				☐ Check if this is an amended filing	
Official Forr	n 107				
		1 A ((- 1 - 1 - 1 - 1 - 1 - 1		- Deal - M	
Statement	of Financia	I Attairs for ind	ividuals Filing fo	or Bankruptcy	04/1
Part 1: G	ive Details Ab	out Your Marital S	status and Where Yo	ou Lived Before	
1. What is you	ır current marital	status?			
☐ Married	our on maria	otatuo i			
✓ Not mar	ried				
2. During the	last 3 years, have	e you lived anywhere o	ther than where you live	now?	
✓ No			-		
Yes. Lis	st all of the places	you lived in the last 3 y	ears. Do not include wher	re you live now.	
(Community		•	• .	in a community property state or territory? ouisiana, Nevada, New Mexico, Puerto Rico, Texas,	,
☑ No					
Yes. Ma	ake sure you fill o	ut Schedule H: Your Co	debtors (Official Form 106	iH).	

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Debtor 1	Iryna		Litot	Case nur	mber (if known)	
	First Name	Middle Name	e Last Name			
Part 2	Explain the	Sources of `	Your Income			
Fill i	n the total amount of	income you rece	ment or from operating a bueived from all jobs and all bus income that you receive toge	sinesses, including par	t-time activities.	endar years?
	No Yes. Fill in the detail	s.				
_			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions
	nuary 1 of the curre	-	Wages, commissions, bonuses, tips	\$30,000.00	Wages, commissions, bonuses, tips	
	•		Operating a business		Operating a business	
	ast calendar year:		✓ Wages, commissions, bonuses, tips	\$11,880.00	Wages, commissions, bonuses, tips	
January	1 to December 31, _	2015) YYYY	Operating a business		Operating a business	
	calendar year before			\$40,921.00	Wages, commissions, bonuses, tips	
January	1 to December 31,	<u>2014</u>)	Operating a business		Operating a business	
Incli une and Deb	ude income regardles mployment; and othe gambling and lottery tor 1.	ss of whether tha r public benefit p winnings. If you	ng this year or the two previous income is taxable. Example bayments; pensions; rental incurare in a joint case and you have been each source separately.	es of other income are come; interest; dividen ave income that you re	ds; money collected from law eceived together, list it only o	vsuits; royalties;
	No Yes. Fill in the detail					
_			Debtor 1		Debtor 2	
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions	Sources of income Describe below.	Gross income from each source (before deductions and exclusions
From Ja	nuary 1 of the curre	nt voor until	child support	\$2,500.00		
	you filed for bankru	-	food stamps	\$3,500.00		
or the I	ast calendar year:		unemployment	\$12,740.00		
	1 to December 31,	2015)	child support	\$3,000.00		
•		YYY	food stamps	\$4,200.00		
For the o	calendar year before	that:				
	1 to December 31,					
•						

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Deb	otor 1	Iryna		Litot	Case number (if known)
		First Name	Middle Name	Last Name	
P	art 3:	List Ce	rtain Payments You	Made Before You	Filed for Bankruptcy
6.	Are eith	er Debtor	1's or Debtor 2's debts p	rimarily consumer del	ots?
	□ No.		Debtor 1 nor Debtor 2 ha d by an individual primarily	•	debts. Consumer debts are defined in 11 U.S.C. § 101(8) as or household purpose."
		During tl	he 90 days before you filed	d for bankruptcy, did yo	u pay any creditor a total of \$6,425* or more?
		□ No.	Go to line 7.		
		☐ Yes.	total amount you paid tha	t creditor. Do not inclu-	of \$6,425* or more in one or more payments and the de payments for domestic support obligations, such as payments to an attorney for this bankruptcy case.
		* Subjec	et to adjustment on 4/01/19	and every 3 years afte	r that for cases filed on or after the date of adjustment.
	∀ Yes	. Debtor	1 or Debtor 2 or both hav	e primarily consumer	debts.
		During t	he 90 days before you filed	d for bankruptcy, did yo	u pay any creditor a total of \$600 or more?
		✓ No.	Go to line 7.		
		Yes.		payments for domestic	l of \$600 or more and the total amount you paid that support obligations, such as child support and alimony. this bankruptcy case.
7.	Insiders corporat agent, ir	include yo tions of whi ncluding on	ur relatives; any general pa ch you are an officer, direc	artners; relatives of any ctor, person in control, o	yment on a debt you owed anyone who was an insider? y general partners; partnerships of which you are a general partner; or owner of 20% or more of their voting securities; and any managing 11 U.S.C. § 101. Include payments for domestic support obligations
	✓ No ☐ Yes	. List all pa	ayments to an insider.		
8.		l year befo ed an insid	•	cy, did you make any	payments or transfer any property on account of a debt that
	Include	payments o	on debts guaranteed or cos	signed by an insider.	
	✓ No ☐ Yes	. List all pa	ayments that benefited an i	insider.	
		l	alamal Astiona Dan		1
	art 4:		/ Legal Actions, Rep		
9.	List all s	uch matter			n any lawsuit, court action, or administrative proceeding? ctions, divorces, collection suits, paternity actions, support or custody
	✓ No ☐ Yes	. Fill in the	details.		

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Deb	otor 1	Iryna	Middle Novee	Litot	Case number (if k	nown)	
10	Within	First Name 1 year before you	Middle Name	Last Name	operty repossessed, foreclosed	l garnished attach	ed.
	seized,	or levied?	fill in the details be		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, garmonou, anaon	,
		Go to line 11. S. Fill in the inform	mation below.				
11.		•		uptcy, did any creditor, i o make a payment becau	ncluding a bank or financial in se you owed a debt?	stitution, set off any	′
	✓ No ☐ Yes	s. Fill in the detail	ls.				
12.		-		ptcy, was any of your pro ustodian, or another offi	operty in the possession of an cial?	assignee for the be	nefit of
	✓ No ☐ Yes	5					
Р	art 5:	List Certain	Gifts and Cor	ntributions			
13.	Within	2 years before ye	ou filed for bankr	uptcy, did you give any g	ifts with a total value of more t	han \$600 per perso	n?
	✓ No ☐ Yes	s. Fill in the detail	ls for each gift.				
14.	. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?						
	☑ No □ Yes	s. Fill in the detail	ls for each gift or c	ontribution.			
P	art 6:	List Certain	Losses				
15.		1 year before yo lisaster, or gamb		otcy or since you filed fo	r bankruptcy, did you lose any	thing because of th	eft, fire,
	✓ No ☐ Yes	s. Fill in the detail	ls.				
P	art 7:	List Certain	Payments or	Transfers			
16.	anyone	you consulted a	about seeking bar	nkruptcy or preparing a k			
		any attorneys, ba	ankruptcy petition p	reparers, or credit counse	ling agencies for services require	ed for your bankrupto	cy.
	☐ No ☑ Yes	s. Fill in the detail	ls.				
	omov La	aw Offices Vas Paid		Description and value legal and filing fee	of any property transferred	Date payment or transfer was made	Amount of payment
Num	abor Str	reet		-		April 2016	\$600.00
INUII	ibei Sti			-		May 2016	\$935.00
City		Staf	te ZIP Code	-			
Ema	ail or websi	te address		-			
Pers	son Who M	lade the Payment, if	Not You	-			

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Debt	or 1	Iryna			Litot	Case number (if I	(nown)	
		First Name		Middle Name	Last Name		,	
					Description and value of any p	property transferred	Date payment	Amount of
		inancial Was Paid			counseling		or transfer was made	payment
reisc	JII VVIIO	vv as Faiu					November 2016	\$10.00
Numb	per S	Street			-		November 2016	\$10.00
					_			
City			State	ZIP Code	-			
Email	or web	site address			-			
Perso	n Who	Made the Payme	nt, if Not	You	-			
17.		-	-		ptcy, did you or anyone else act vith your creditors or to make pa			erty to
	Do no	t include any p	ayment	or transfer that	you listed on line 16.			
	✓ No	o es. Fill in the d	letails.					
		-	-		uptcy, did you sell, trade, or oth se of your business or financial		pperty to anyone, oth	er than
		-			s made as security (such as granti nave already listed on this stateme	•	or mortgage on your p	property).
	□ No	o es. Fill in the c	letails.					
		_			Description and value of any property transferred		property or payments	
	chase on Who	Received Transfe	er		2009 Nissan Rogue	\$10,500	para ar errenage	October 2015
					_			
Numb	oer S	Street						
					-			
City			State	ZIP Code	-			
•	on's re	elationship to yo						
		, ,			-			
		-	-		ruptcy, did you transfer any pro called asset-protection devices.)	perty to a self-settled t	rust or similar device	e ot which
	M N∘		- `		,			
	_	es. Fill in the d	letails.					

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Deb	tor 1	Iryna First Name	Middle Name	Litot Last Name	Case number (if known)	
Đ:	art 8:	1			Safe Deposit Boxes, and Storage Units	
	Within 1 benefit, Include	year before you f closed, sold, mov checking, savings,	iled for bankruptcy, ed, or transferred? money market, or oth	, were any financial a	accounts or instruments held in your name, or for your certificates of deposit; shares in banks, credit unions, brokerage	
	☑ No	pension funds, coo	peratives, association	ons, and other financia	al institutions.	
21.	for secu	now have, or did y ırities, cash, or otl	-	ear before you filed fo	or bankruptcy, any safe deposit box or other depository	
	✓ No ☐ Yes	. Fill in the details.				
22.	☑ No	ou stored property Fill in the details.	in a storage unit or	place other than you	ur home within 1 year before you filed for bankruptcy?	
Pa	art 9:	Identify Prop	erty You Hold o	r Control for Som	neone Else	
23.	-	hold or control an in trust for someo		neone else owns? Inc	clude any property you borrowed from, are storing for,	
	✓ No ☐ Yes	. Fill in the details.				
Pa	art 10:	Give Details	About Environm	ental Information	1	
For	the purp	ose of Part 10, the	following definition	ns apply:		
ł	nazardou	s or toxic substan	ce, wastes, or mate	erial into the air, land,	ulation concerning pollution, contamination, releases of , soil, surface water, groundwater, or other medium, ubstances, wastes, or material.	
		-		s defined under any on the coluding disposal site	environmental law, whether you now own, operate, or es.	
				nmental law defines aminant, or similar it	as a hazardous waste, hazardous substance, toxic em.	
Rep	ort all no	otices, releases, ar	d proceedings that	t you know about, reç	gardless of when they occurred.	
24.	Has any law?	governmental un	it notified you that y	you may be liable or _l	potentially liable under or in violation of an environmental	
	✓ No ☐ Yes	. Fill in the details.				

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Deb	otor 1	Iryna		itot	Case number (if known)	
٥.		First Name		ast Name		
25.		e you notified any g No	overnmental unit of any re	lease of hazardo	ous material?	
		Yes. Fill in the detail	s.			
26.	Have		n any judicial or administra	ative proceeding	g under any environmental law? Include settlements and	
	☑ ¹	No				
	<u> </u>	Yes. Fill in the detail	S.			
Р	art 1	1: Give Details	s About Your Busines	s or Connect	ions to Any Business	
27.		in 4 years before yoness?	ou filed for bankruptcy, did	you own a busi	iness or have any of the following connections to any	
		—			ther activity, either full-time or part-time	
		A member of a l	limited liability company (LLC	C) or limited liabili	ity partnership (LLP)	
			etor, or managing executive o	of a corporation		
		An owner of at le	east 5% of the voting or equ	ity securities of a	corporation	
	ب		ve applies. Go to Part 12. apply above and fill in the de	tails below for ea	ch business.	
28.	_				ncial statement to anyone about your business? Include	
	all financial institutions, creditors, or other parties.					
	□ ¹	No				
	□ `	Yes. Fill in the detail	s below.			
P	art 1	2: Sign Below				
that pro	t answ perty	vers are true and co by fraud in connect	orrect. I understand that m	aking a false sta	attachments, and I declare under penalty of perjury atement, concealing property, or obtaining money or nes up to \$250,000, or imprisonment for up to 20 years,	
-		na Litot	X			
	Iryna L	_itot, Debtor 1		Signature of De	ebtor 2	
	Date	11/03/2016		Date		
Did	you a	attach additional pa	ges to Your Statement of F	inancial Affairs	for Individuals Filing for Bankruptcy (Official Form 107)?	
☑	No Yes					
Did	you p	pay or agree to pay	someone who is not an att	orney to help yo	ou fill out bankruptcy forms?	
	No					
		Name of person			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).	

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Fill in this info	Fill in this information to identify your case:					
Debtor 1	Iryna First Name	Middle Name	Litot Last Name			
Debtor 2	i iist ivaille	widdle Name	Lastivallie			
	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court fo	or the: NORTHERN D	ISTRICT OF ILLIN	ois		
Case number (if known)						

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Hold Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Hold Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral

What do you intend to do with the property that secures a debt?

Did you claim the property as exempt on Schedule C?

None.

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will this lease be assumed?

None.

Part 3: Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and personal property that is subject to an unexpired lease.

X /s/ Iryna Litot	X
Iryna Litot, Debtor 1	Signature of Debtor 2
Date 11/03/2016 MM / DD / YYYY	Date

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.
 Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 -- Liqudation
- Chapter 11 -- Reorganization
- Chapter 12 -- Voluntary repayment plan for family farmers or fishermen
- Chapter 13 -- Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

+	\$75	filing fee administrative fee trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that the even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans:
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form-sometimes called the *Means Test*--deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

+		filing fee administrative fee
	\$1 717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

+		filing fee administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

+		filing fee administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury--either orally or in writing--in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to:

http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

In re Iryna Litot	Case No.	
	Chapter	7
DISCLOSURE OF COMPENSA	TION OF ATTORNEY FOR	R DEBTOR
 Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(that compensation paid to me within one year before the services rendered or to be rendered on behalf of the deb is as follows: 	filing of the petition in bankruptcy, or	agreed to be paid to me, for
For legal services, I have agreed to accept	\$	61,200.00
Prior to the filing of this statement I have received		61,200.00
Balance Due		\$0.00
2. The source of the compensation paid to me was: ☐ Debtor ☐ Other (specify)		
3. The source of compensation to be paid to me is:		
☑ Debtor ☐ Other (specify)		
4. I have not agreed to share the above-disclosed com associates of my law firm.	pensation with any other person unle	ess they are members and
I have agreed to share the above-disclosed compen associates of my law firm. A copy of the agreement, compensation, is attached.		
5. In return for the above-disclosed fee, I have agreed to re-	nder legal service for all aspects of the	he bankruptcy case, including:
 a. Analysis of the debtor's financial situation, and rendering bankruptcy; 	ing advice to the debtor in determining	ng whether to file a petition in
b. Preparation and filing of any petition, schedules, state	ments of affairs and plan which may	be required;
c. Representation of the debtor at the meeting of creditor	rs and confirmation hearing, and any	adjourned hearings thereof:

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B2030 (Form 2	2030)	(12/15)
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6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

11/03/2016 /s/ Igor Gromov

Date Igor Gromov

Ğromov Law Offices 1020 N. Milwaukee Ave., Ste. 101

Deerfield, IL 60015

Phone: (847) 845-1779 / Fax: (888) 415-7687

Bar No. 6282530

/s/ Iryna Litot

Iryna Litot

Case 16-35312 Doc 1 IFFIGALISDAY GCES (CLASSIC PROTECTION TO A 14:28:39 CLASSIC PROTECTION TO A 14:28:39

Desc Main

Pursuant to 11 U.S.C. Section 528 the undersigned parties agree to the following:

Igor Gromov, ("Attorney"), as a member of the firm of Gromov Law Offices, 1020 North Milwaukee Avenue, Suite 101, Deerfield, Illinois, does hereby agree to render legal services for all aspects of a bankruptcy case to Iryna Litot, ("Client(s)") including:

- a. Analysis of the financial situation of, and rendering advice to, the undersigned in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of Chapter 7 petition, schedules, and statements, which may be required;
- c. Representation at the meeting of creditors and any adjourned hearings thereof;

The following services are not included in the legal fees stated below:

- d. Negotiations with secured creditors to determine replacement value;
- e. Preparation and filing of motions for avoidance of liens;
- f. Representation in any dischargeability actions, rule 2004 examinations;
- g. Representation in relief from stay actions;
- h. Representation in any other adversary proceeding, or in regard to any other motion or hearing.

Client(s) is/are responsible for payment for credit counseling and post-discharge debtor education, and credit reports, at the time such services are purchased.

I/We, the Client(s) hereby retain Igor Gromov to file a bankruptcy petition on my/our behalf. Client(s) agree(s) to pay the sum of \$1,200 to Attorney for legal services, plus the filing fee appropriate for the chapter under which Client(s) choose(s) to file a petition (Chapter 7 - \$335), Legal fee to Attorney is paid as follows: \$600 at time of execution of this Contract, \$600 before the case is filed. Filing fee shall be paid prior to the filing of the petition. The legal fee to Attorney represents a classic retainer and is not refundable in whole or in part. Client(s) understand(s) and acknowledge that in consideration of retaining Igor Gromov to file a bankruptcy petition, Igor Gromov will be giving up other client opportunities by dedicating time to Client(s)' bankruptcy case. Client must provide Attorney with a full list of creditors and correct addresses. In the event Client wishes to amend his list of creditors by adding or removing creditors, client shall pay additional filing fee of \$30 to the Court and \$50 per creditor to Igor Gromov.

Attorney agrees to use his best efforts in representing Client(s) in this matter. However, the Client(s) recognize(s) that the Judge, and not the Attorney makes the final decision in the case, and therefore, Attorney cannot guarantee any particular outcome of this matter. The parties agree that compensation will not be shared with people who are not members or associates of the above named law firm. The parties agree that the above named Attorney and firm do not and will not represent the undersigned, unless and until initial payment is tendered to and accepted by said Attorney.

The Client(s) agree(s) to timely provide all information and documents necessary or helpful in preparing a petition in bankruptcy, and by their signatures certify that said information, documents, and other communications with said Attorney, will be accurate, complete, and truthful, to the best of the undersigned's knowledge and belief. Client(s) agree(s) that all assets and all liabilities are required to be completely and accurately disclosed in the documents filed to commence the case, and the replacement value of each asset must be stated after reasonable inquiry to establish such value. Current monthly income and disposable income are required to be stated after reasonable inquiry. Information that Client(s) provide(s) may be audited and failure to provide such information may result in dismissal of the case under this title or other sanction, including criminal sanctions.

This instrument represents the comp				y any oral or
written representation unless contain	ied-in writing and signed by	y boin partie	s.	, F
			1	04/14/2016
Iryna Litot date	Joint Debtor's Name	date	Attorney Igor Gromov	date
Trytha Eriot ()	Joint Deotor S Name	date 1	Attorney agor Greanev	date

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

IN RE: Iryna Litot CASE NO

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

	The above named D	Debtor hereby ve	rifies that th	e attached list o	of creditors is	true and correct t	o the best of h	nis/her
knowle	edge.							

Date	Signature/s/ Iryna Litot	
	Iryna Litot	
Date	Signature	

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Debtor 1	Iryna	•	Litot	Case number (if known)	
	First Name	Middle Name	Last Name	(P) (V)	
Part 7:	Sign Below				
For you	X R	I have examinated and correct.	ned this petition, and I dec	clare under penalty of perjury that the	e information provided is true
			11, United States Code. I	, I am aware that I may proceed, if e understand the relief available unde	and the second s
				not pay or agree to pay someone who and read the notice required by 11 U	
	х	I request relie	of in accordance with the c	hapter of title 11, United States Cod	le, specified in this petition.
	e y	connection w		concealing property, or obtaining m result in fines up to \$250,000, or im and 3571.	
	전공 실	Iryna Litot	on 04/14/2016 MM / DD / YYYY	Signature of D Executed on _	ebtor 2

Debtor 1

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		¥/			
Fill in this i	information to	identify your case	9:		
Debtor 1	Iryna First Name	Middle Name	Litot Last Name	 ;	
The second secon	r ist name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing	ng) First Name	Middle Name	Last Name		¥
United States	Bankruptcy Court for	or the: NORTHERN D	DISTRICT OF ILLINO	is	
Case number			57		Licaria
(if known)				1 Total (1997)	k if this is an nded filing
Official For	m 106Dec	v			
NE SELECTION DE CASO		Individual Deb	tor's Schedules	: Y	12/15
f two married p	people are filing to	gether, both are equa	illy responsible for sup	plying correct information.	
250,000, or im			y fraud in connection v 18 U.S.C. §§ 152, 1341	with a bankruptcy case can result i , 1519, and 3571.	n fines up to
Did you pa	y or agree to pay	someone who is NOT	an attorney to help yo	u fill out bankruptcy forms?	
No No		40			
☐ Yes.	Name of person	₩ 		Attach Bankruptcy Pe	tițion Preparer's Notice,
				Declaration, and Signa	ature (Official Form 119).
		# 2			4
		9			
Under pent		eclare that I have read	I the summary and sch	edules filed with this declaration a	nd that they are
X Iryna Lit	Ot, Debtor 1		XSignature of Deb	tor 2	
	4/14/2016 MM / DD / YYYY		Date MM / DD /	YYYY	

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Deb	otor 1	Iryna	2.	Litot	Case number (if known)	
		First Name	Middle Name	Last Name		
Р	art 11:	Give Detail	s About Your Bus	iness or Connecti	ons to Any Business	
27.	Within 4	- 55 S	ou filed for bankrupt	ey, did you own a busi	ness or have any of the following connec	tions to any
		A member of a A partner in a p An officer, direct	limited liability compar partnership ctor, or managing exec	ny (LLC) or limited liabilit		
			ove applies. Go to Par apply above and fill in	t 12. the details below for eac	ch business.	
28.			rou filed for bankruptes, creditors, or other p		cial statement to anyone about your bus	iness? Include
	□ No □ Yes	. Fill in the deta	ils below.			
P	art 12:	Sign Below	Y		- His	
that pro or b	t answers	s are true and c fraud in connec	orrect. I understand	that making a false sta	attachments, and I declare under penalty tement, concealing property, or obtaining nes up to \$250,000, or imprisonment for u	money or
ı	Date	04/14/2016		Date		
Did	you atta	ch additional pa	ages to Your Stateme	nt of Financial Affairs f	or Individuals Filing for Bankruptcy (Offic	ial Form 107)?
	No Yes	W.				
Did	you pay	or agree to pay	someone who is not	an attorney to help yo	u fill out bankruptcy forms?	
_	No Yes. Na	me of person	£1		Attach the Bankruptcy F	Petition Preparer's Notice,
_					Declaration and Cignatu	10fficial Form 110)

		in 1905	*			460
Fill in this	s information to id	dentify your case:				
Debtor 1	Iryna		itot	_		
	First Name	Middle Name L	ast Name			
Debtor 2 (Spouse, if f	iling) First Name	Middle Name L	ast Name	-		
United State	es Bankruptcy Court for	the: NORTHERN DISTRI	ICT OF ILLINOIS	_		
Case number	er	29				Check if this is an
(if known)						amended filing
Official Fo	orm 108	2				
The second secon		for Individuals Fili	ing Under Chap	ter 7		12/15
If you are an	individual filing unde	r chapter 7, you must fill o	ut this form if:	NG-201		1,560
■ creditors	have claims secured	by your property, or				
you have	leased personal prop	erty and the lease has not	expired.			
of creditors,	this form with the co whichever is earlier, to you list on the form.	ourt within 30 days after you unless the court extends th	u file your bankruptcy le time for cause. You	petition or by the date must also send copie	set for the med s to the credito	eting rs
	d people are filing tog must sign and date t	ether in a joint case, both a he form.	are equally responsibl	e for supplying correc	t information.	
STATE OF THE RESIDENCE OF		ossible. If more space is n and case number (if know	(9	te sheet to this form.	On the top of a	ny
Part 1:	List Your Credite	ors Who Hold Secured	d Claims			
	creditors that you list information below.	ted in Part 1 of Schedule D	: Creditors Who Hold (Claims Secured by Pro	operty (Official	Form 106D),
Identify	the creditor and the p	roperty that is collateral	What do you inte property that sec			im the property on Schedule C?
None.					i	
Part 2:	List Your Unexp	ired Personal Propert	y Leases	1.50		
fill in the info	rmation below. Do n	rty lease that you listed in ot list real estate leases. <i>U</i> nexpired personal property	Inexpired leases are le	ases that are still in el	fect; the lease	period has not
Describe	e your unexpired pers	onal property leases			Will this leas	e be assumed?
None.						
Part 3:	Sign Below					
	property that is subje	are that I have indicated mot to an unexpired lease. X Sign	nature of Debtor 2	property of my estate	that secures a	lebt and
	I/DD/YYYY		MM / DD / YYYY			

Official Form 108

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B2030 (Form 2030) (12/15)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me representation of the debtor(s) in this bankruptcy proceeding.					
04/14/2016		0			
Date	Igor Gramov	Bar No.	6282530		
	Gromov Law Offices	Bar No.	6282530		
The second secon		Bar No.	6282530		
The second secon	Gromov Law Offices	Bar No.	6282530		

Invna Litet

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

IN RE: Iryna Litot

CASE NO

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

i ne above named L knowledge.	Deptor nereby vermes that t	ne attached list of creditors is true and correct to the best of this men	
Date 4/14/2016	0	Signature MM A A A A A A A A A A A A A A A A A A	
Date	,	Iryna Litot	
Data		Signature	

Desc Main Case 16-35312 Doc 1 Page 73 of 73 Document Case number (if known) Litot Debtor 1 Iryna Middle Name Determine Whether the Means Test Applies to You Part 2: 12. Calculate your current monthly income for the year. Follow these steps: \$0.00 12 Multiply by 12 (the number of months in a year). \$0.00 12b. The result is your annual income for this part of the form. 12b. 13. Calculate the median family income that applies to you. Follow these steps: Illinois Fill in the state in which you live. Fill in the number of people in your household. 2 \$63,896.00 Fill in the median family income for your state and size of household..... 13. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? 14a. There is no presumption of abuse. Go to Part 3. 14b. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Part 3: Sign Below By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. Iryna Litot, Debtor Signature of Debtor 2 Date 4/14/2016 MM / DD / YYYY MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.